

# 医疗服务提供者名录



**Medi-Cal**  
San Diego 县 | September 2024

**blue**   
california  
Promise Health Plan







Promise Health Plan

### LANGUAGE ASSISTANCE NOTICE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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# A. 简介

感谢您选择 Blue Shield of California Promise Health 计划。此医疗名单列出了隶属于 Blue Shield Promise Health 计划的部分诊所、医生、医院和其他医疗机构。

加入 Blue Shield of California Promise Health 计划后，您应选择一名主治医师 (PCP)，这是每位会员都享有的待遇。如果您不进行自主选择，Blue Shield Promise 将代替您选择一位。您的 PCP 将负责您的预防性护理以及生病治疗。必要时，您的 PCP 会将您送往专科提供者或其他专科服务提供者处接受治疗。PCP 随叫随到，满足您的医疗保健需求，并与您一起努力保证您的健康。

## 更换 PCP

您可以随时致电 Blue Shield Promise 客户关怀部更换您的 PCP，免费电话：

**(855) 699-5557 [TTY: 711]**。更换要求将在下个月首日生效。您还可以访问我们的网站：

[blueshieldca.com/promise](http://blueshieldca.com/promise)。

作为 Blue Shield of California Promise Health 计划的会员，您将收到一张会员 ID 卡，如本页所示。每次看医生、挂急诊或看眼科医生时，您都需要出示此卡。请将此卡随身携带。


当您拿到 ID 卡后，请确认信息无误。如果信息存在错误，请致电 Blue Shield of California Promise Health 计划客户关怀部：

**(855) 699-5557**。

请勿丢失您的 Medi-Cal (BIC) 卡。您需要使用 Medi-Cal (BIC) 卡看 Medi-Cal 牙医以及

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者名录中的信息可能会发生变化。

Blue Shield of California Promise Health 计划未承保的其他医疗保健服务。

	Member: JOHN DOE Member ID: AAA123456789
CIN: 123456789 Health Plan Group #: E011001 Effective Date: MM/DD/YYYY	Information Information Line 2 PCP Name Phone Number 1234 Street City, ST Zip

<a href="http://www.blueshieldca.com/promise">www.blueshieldca.com/promise</a>	
Customer Care	<b>(855) 699-5557 (TTY: 711)</b>
Provider Services	<b>(800) 468-9935</b>
Transportation	<b>(800) 433-2178</b>
Nurse Help Line	<b>(800) 609-4166</b>
Behavioral Health	<b>(855) 321-2211 (TTY: 711)</b>
<small>This member has limited benefits outside of the plan service area and outside of California. Promise: This card is for identification purposes only, and does not prove eligibility for services. Please contact your plan administrator through Blue Shield of California Promise Health Plan services. Please call all claims and view local DSOs for more services and the member resource services. CA Promise: Call Provider Gateway: Select Health Care Provider/Member/Address prior to submitting to avoid delays in the payment. Blue Shield of California Promise Health Plan is a fully self-funded health plan provided to eligible members by contracted and non-contracted providers. If the member is covered by OTHER/DCR coverage, please provide the name and policy of Blue Shield of California Promise Health Plan as soon as possible. Non-Emergency services rendered only after medical screening requirements and the member is responsible to submit the claim and require pre-authorization approval. Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association.</small>	

Blue Shield 身份卡 (BIC)

## 通过 Medi-Cal Rx 提供药房服务

Department of Health Care Services (DHCS，医疗保健服务部) 负责管理 Medi-Cal 会员的药房服务。如需药房服务，请拨打 Medi-Cal Rx 呼叫中心热线 **1-800-977-2273**，呼叫中心将全天候在线，或者 TTY 使用者可拨打 711，时间为周一至周五上午 8 点至下午 5 点。

大多数药房都接受 Medi-Cal Rx。您可以联系 Medi-Cal 会员帮助热线（电话：1-800-541-5555，TTY: 1-800-430-7077）询问药房是否接受 Medi-Cal Rx。如需查找药房位置，请使用 Medi-Cal Rx 药房定位器进行在线查询：[www.Medi-CalRx.dhcs.ca.gov](http://www.Medi-CalRx.dhcs.ca.gov) 或拨打 Medi-Cal Rx 呼叫中心热线：**1-800-977-2273**。



## 如何使用该名单

您可以使用此医疗服务提供者名录来选择 Blue Shield Promise 签约 PCP。PCP 以及专科服务提供者、医院和其他支持服务提供者按城市字母顺序列出。在 “Blue Shield Promise provider network” 部分，您将找到有关如何阅读服务提供者列表以及如何查找您需要了解的每位服务提供者的重要信息。

## 有关名录列表的重要信息

本医疗名录将根据封面上所列日期进行更新。本名录印刷版可能会添加或删除某些 PCP。我们不保证每家 PCP 仍然接收新会员。如需获取有关您所在地区 PCP 的最新信息，您可以访问 [blueshieldca.com/promise](https://blueshieldca.com/promise) 或致电 Blue Shield Promise 客户服务免费电话：

**(855) 699-5557 [TTY:711]**。或者于周一至周五上午 8 点至下午 6 点直接前往我们的办公室，无需预约。我们有与您无障碍交流的员工。您还可以访问我们的网站 [blueshieldca.com/promise](https://blueshieldca.com/promise)。

## 其他重要信息和重要披露

某些服务提供者和医院不提供您所需健康计划可能承保的以下一项或多项服务，如计划生育；节育，包括紧急节育；绝育，包括临产和分娩时的输卵管结扎；不孕不育治疗；或堕胎。

请致电 Blue Shield Promise 客户关怀部：

**(855) 699-5557** 确认您能获得的所需医疗保健服务。

有关服务提供者的更多信息，包括其教育经历和经验（例如其所就读的医学院、住院服务提供者培训和委员会认证状态），请致电 Blue Shield Promise 客户关怀部或在我们网站提供的服务提

供者搜索工具进行查询，网址：

[blueshieldca.com/promise](https://blueshieldca.com/promise)。

访问某些服务提供者可能需要授权或转诊。Blue Shield Promise 为包括残疾参保者在内的所有人提供全面、平等的承保服务。所有服务提供者都必须完成文化能力培训。

## 翻译服务

为便利您，Blue Shield Promise 提供：

- **双语工作人员**，以您的语言为您提供帮助。
- **翻译服务**，包括美国手语，免费满足您的所有医疗保健需求。您无需请朋友或家人为您翻译。我们将全天候无休为您提供翻译服务：
  - ✓ **医疗服务**：就诊、非工作时间服务、紧急护理服务和健康教育课程。
  - ✓ **非医疗服务**：客户服务、会员投诉和会员指导会议。
  - ✓ **其他格式的材料**例如盲文、音频或大字体。

您只需致电您的医疗团队或 Blue Shield

Promise 客户关怀部。对于预定的会面，请确保在预约前至少十 (10) 个工作日要求提供口译员。

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medical](https://blueshieldca.com/promise/medical)。此医疗服务提供者名录中的信息可能会发生变化。



Promise Health Plan

## 非歧视通知

歧视属于违法行为。Blue Shield of California Promise Health Plan 遵守州和联邦民权法律。Blue Shield of California Promise Health Plan 不会因生理性别、种族、肤色、宗教、血统、原国籍、族群认同、年龄、精神残疾、身体残疾、医疗状况、遗传信息、婚姻状况、性别、性别认同或性取向而歧视、排斥或区别对待任何人。

Blue Shield of California Promise Health Plan 规定：

- 为残障人士免费提供援助和服务，以便他们与我们更好地进行沟通，例如：
  - ✓ 合格的手语翻译员
  - ✓ 其他格式的书面信息（大字体、音频、可获取的电子格式和其他格式）
- 为母语非英语的人士提供的免费语言服务，例如：
  - ✓ 合格的口译员
  - ✓ 用其他语言写的信息

如果您需要上述服务，请在周一至周五上午 8 点至下午 6 点联系 Blue Shield of California Promise Health Plan。致电您所在地区的客户服务部：

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

如果您有听力或语言障碍，请拨打 TTY 专线：711。根据您的要求，我们可以为您提供本文件的盲文版、大字版、录音带或电子版。如需获得任何上述替代格式的副本，请按如下信息致电或致函：

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

## 如何提出申诉

如果您认为 Blue Shield of California Promise Health Plan 未能提供这些服务，或基于生理性别、种族、肤色、宗教、血统、原国籍、族群认同、年龄、精神残疾、身体残疾、医疗状况、遗传信息、婚姻状况、性别、性别认同或性取向以其他方式非法地歧视他人，您可向 Blue Shield of California Promise Health Plan 民权协调员提出申诉。您可通过电话、信函、亲自提交或电子方式提出申诉：

- 通过电话：您可在周一至周五上午 8 点至下午 6 点，致电联系 Blue Shield of California Promise Health Plan 民权协调员，电话：(844) 883-2233。或者，如果您有听力或语言障碍，请拨打 TTY/TDD 专线：711。
- 通过信函：填写投诉表或者写信并寄至：  
Blue Shield of California Promise Health Plan Civil Rights Coordinator  
3840 Kilroy Airport Way, Long Beach, CA 90806

- 亲自提交: 前往您医生的诊室或 Blue Shield of California Promise Health Plan 并告知您想提出申诉。
- 电子方式: 访问 Blue Shield of California Promise Health Plan 的网站 [www.blueshieldca.com/promise/medi-cal](http://www.blueshieldca.com/promise/medi-cal)。

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**OFFICE OF CIVIL RIGHTS (民权办公室) - CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (加州医疗保健服务部)**

您还可通过电话、信函或电子方式向加州 Department of Health Care Services 的民权办公室提出民权投诉:

- 通过电话: 请致电 **916-440-7370**。如果您有听力或语言障碍, 请致电 **711 (Telecommunications Relay Service)**。
- 通过信函: 填写投诉表或寄送信函至:  
**Deputy Director, Office of Civil Rights Department of Health Care Services  
P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413**  
投诉表格可于以下网站获取: [http://www.dhcs.ca.gov/Pages/Language\\_Access.aspx](http://www.dhcs.ca.gov/Pages/Language_Access.aspx)。
- 电子方式: 发送电子邮件至 [CivilRights@dhcs.ca.gov](mailto:CivilRights@dhcs.ca.gov)。

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**OFFICE OF CIVIL RIGHTS - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (美国卫生和公共服务部)**

如果您认为自己因种族、肤色、原国籍、年龄、残障情况或性别而遭受歧视, 您还可通过电话、信函或电子方式向美国 Department of Health and Human Services 的民权办公室提交民权投诉:

- 通过电话: 请致电 **1-800-368-1019**。如果您有语言或听力障碍, 请拨打 TTY/TDD 专线: 1-800-537-7697。
- 通过信函: 填写投诉表或寄送信函至  
**U.S. Department of Health and Human Services  
200 Independence Avenue, SW, Room 509F, HHH Building  
Washington, D.C. 20201**  
投诉表格可于以下网站获取: <http://www.hhs.gov/ocr/office/file/index.html>。
- 电子方式: 访问民权办公室的投诉门户网站:  
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>。





# Blue Shield Promise 医疗服务提供者网络

## 定义和常规信息

**社区诊所：**非营利诊所，为 Blue Shield Promise 会员提供医疗保健服务。

**家庭和全科医学：**治疗儿童和成年人的医生。

**联邦资质健康中心 (FQHC)：**面向社区的组织，为所有年龄段人员提供初级和预防性护理，无论其支付能力或健康保险状况如何。

**医院：**Blue Shield Promise 与多家医院签订合同。查看您想要选择主治医师的附属医院。

**内科：**为 18 岁以上成年男性和女性提供治疗的医生。

**独立执业协会 (IPA)：**与医生团队签订合同以提供医疗保健服务的医疗保健模式。

**医疗团队：**为 Blue Shield Promise 会员提供医疗保健服务的医生团队。

**妇产科：**专门从事妇女健康和生育保健的医生。

**儿科：**治疗 18 岁以下儿童的医生。

**主治医师 (PCP)：**作为 Blue Shield Promise 会员，您必须选择一位 PCP 来满足您的一般医疗保健需求。如果您不进行自主选择，我们将代替您选择。所有 PCP 均按城市字母顺序列出。您可以选择以下任何类型的医生：

- 家庭和全科医学
- 内科
- 妇产科
- 儿科

## 服务提供者名录关键信息

- \* 服务提供者不接受此健康网络中的新患者
- 📍 服务提供者地址
- ☎️ 服务提供者电话号码
- 🕒 服务提供者非工作时间电话号码
- 🗣️ 该服务提供者办公语言
- 🕒 服务提供者办公时间
- ♿️ 无障碍信息
- 🌐 服务提供者网站

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者名录中的信息可能会发生变化。

# Promise 名录无障碍设施标识

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以下是有关老年人和残疾人 (SPD) 就诊时的基本无障碍需求信息。我们了解到会员的需求各不相同。因此，我们要求会员致电医生办公室商讨他们的就医需求。

## E = 检查室

检查室入口为无障碍通道。入口宽阔，可以容纳轮椅或代步车，容易打开。检查室空间够大，可以容纳轮椅或代步车。

## EB = 外部建筑

路缘坡道和建筑物的其他坡道足够宽，可容纳轮椅或代步车。坡道两侧均设有扶手。大楼设有“无障碍”入口。入口宽阔，可以容纳轮椅或代步车，且装有把手，便于抓扶。

## IB = 室内建筑

入口宽阔，可以容纳轮椅或代步车，且装有把手，便于抓扶。室内坡道足够宽，并且装有扶手。楼梯，均安装扶手。

如果有电梯，则建筑物开放时可供公众和患者使用。电梯内播报声音清晰洪亮，盲文按钮触手可及。电梯空间宽阔，可供轮椅或代步车转身。如果有平台升降机，无需帮助即可使用。

## P = 停车场

停车位（包括货车可用停车位）均设无障碍通道。停车场、办公室和下车地点之间的通道设有路缘坡道。

## R = 洗手间

卫生间均为无障碍，门易打开，入口宽阔，足以容纳轮椅或代步车。卫生间有足够的空间供轮椅或代步车转身关门。有扶手，便于从轮椅/代步车转移到厕所位。水槽位置低，水龙头、肥皂和卫生纸也容易拿取和使用。

## T = 检查台

检查台可以上下移动，台上设有扶手，可以为使用轮椅和代步车的人提供便利。体重秤可容纳轮椅。

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者名录中的信息可能会发生变化。



## 无障碍代码说明

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代码	说明
<b>P</b>	停车场
<b>EB</b>	外部建筑
<b>IB</b>	室内建筑
<b>W</b>	轮椅
<b>R</b>	卫生间
<b>E</b>	检查室
<b>T</b>	检查台

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者名录中的信息可能会发生变化。

# 如何阅读服务提供者列表

以下信息可以帮助您选择主治医生

1. 服务提供者的医学专业
2. 服务提供者姓名、执照类型
3. 服务提供者的 ID 号
4. 服务提供者性别
5. 服务提供者的许可证号码
6. 服务提供者的全美服务提供者识别号 (NPI) 编号
7. 服务提供者和员工所使用的语言。
8. 文化能力培训
9. 医院隶属关系
10. 委员会认证专科：
11. FQHC/医疗团队名称
12. 服务提供者地址
13. 服务提供者电话号码
14. 服务提供者传真号码
15. 服务提供者网站
16. 服务提供者电子邮件地址
17. Medi-Cal 公开小组：
18. 最小/最大患者年龄：
19. 为残疾人建立无障碍通道
20. 提供者办公时间

示例：

1. 儿科
2. Doe, Jane，医学博士
3. 服务提供者 ID：00A2123456
4. 女性
5. 执照编号 00A123456
6. NPI: 0123456789
7. 英语，西班牙语，越南语，波斯语
8. 是
9. Good Samaritan Hospital
10. 儿科
11. Northeast County Community Clinic
12. 3840 Kilroy Airport Way  
Long Beach, CA 90806
13. (855) 699-5557
14. (855) 699-5557
15. www.northeastclinic.com
16. doctordoe@gmail.com
17. 是/否
18. 0-18
19. 有限服务。P、EB、IB、E
20. 周一至周五上午 8 点至下午 5 点

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者名录中的信息可能会发生变化。



## 及时获得护理标准

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预约类型:

必须在以下时间内预约：

不需要预先批准（事先授权）的紧急护理预约	48 小时
必须通过预先批准（事先授权）的紧急护理预约	96 小时
非紧急初级保健预约	10 个工作日
非紧急专家	15 个工作日
非紧急心理健康服务提供者（非医生）	10 个工作日
诊断或治疗伤害、疾病或其他健康状况辅助服务的非紧急预约	15 个工作日
正常营业时间内的电话等待时间	10 分钟
分诊 - 24/7 全天候服务	24/7 服务 - 不超过 30 分钟

如需了解最新信息，请致电 1-855-699-5557，联系 Blue Shield Promise 客户关怀部，周一至周五上午 8:00 至下午 6:00 TTY/TDD: 711。在线访问 [blueshieldca.com/promise/medical](https://blueshieldca.com/promise/medical)。此医疗服务提供者名录中的信息可能会发生变化。



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

**San Diego:**

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





## B. 联邦合资质的健康诊所

### ALPINE

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.mtnhealth.org](http://www.mtnhealth.org)

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 90000681

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.mtnhealth.org](http://www.mtnhealth.org)

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A158569

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.mtnhealth.org](http://www.mtnhealth.org)

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: [www.mtnhealth.org](http://www.mtnhealth.org)

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: NP95005999  
NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.mtnhealth.org](http://www.mtnhealth.org)

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: NP95006360  
NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.mtnhealth.org](http://www.mtnhealth.org)

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: PA20490  
NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.mtnhealth.org](http://www.mtnhealth.org)

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: PA52347  
NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes  
Cultural Competency: No

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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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


 **Accessibility: CONTACT PROVIDER**


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.mtnhealth.org](http://www.mtnhealth.org)

### **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

Fax: 619-205-6305


 After Hours Phone: 619-662-4100

License Number: C172036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
 Cultural Competency: No

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

American Sign Language (ASL):  
 N

 **Accessibility: CONTACT PROVIDER**


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.mtnhealth.org](http://www.mtnhealth.org)

### **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

Fax: 619-205-6305


 After Hours Phone: 619-662-4100

License Number: DC28335

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
 Cultural Competency: No

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

American Sign Language (ASL):  
 N

 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.mtnhealth.org](http://www.mtnhealth.org)


### **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110

ALPINE, CA 91901-1103

 Phone: 619-445-6200


 After Hours Phone: 619-445-6200


License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
 Cultural Competency: No

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

American Sign Language (ASL):  
 N

 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.mtnhealth.org](http://www.mtnhealth.org)


## **BORREGO SPRINGS**

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

 4343 YAQUI PASS RD BORREGO SPRINGS, CA 92004

 Phone: 760-767-5051

 After Hours Phone: 760-767-5051

License Number: C39104

NPI: 1134144165

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

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

Cultural Competency: No

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

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone: 760-767-5051

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

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

Cultural Competency: No

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

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone: 760-767-5051

License Number: 80000651

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

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

Cultural Competency: Yes

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone: 760-767-5051

License Number: G85319

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

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

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### FOUNDTION


 Website: N/A


### CAMPO

#### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:  
619-445-6200


License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

#### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:  
619-445-6200

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

#### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028


 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

#### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A18400

NPI: 1598122871

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

 Site English Spoken: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: N/A*

### **SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE**

*Provider ID: 519686*

 1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906-2028

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: 90000660*


*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: N/A*

### **SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE**

*Provider ID: 519686*

 1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906-2028

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: PA20490*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: N/A*

## **CARLSBAD**

### **TRUECARE**

*Provider ID: 480120*

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

 *Phone: 760-736-6767*

 *After Hours Phone:  
760-736-6767*

*License Number: PA53036*


*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*


 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: N/A*


### **TRUECARE**


*Provider ID: 480120*

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


 Phone: 760-736-6767  
Fax: 760-720-7204

 After Hours Phone:  
760-736-6767

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### TRUECARE

Provider ID: 480120

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

 Phone: 760-736-6767  
Fax: 760-720-7204

 After Hours Phone:  
760-736-6767

License Number: 80000630

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### TRUECARE

Provider ID: 480120

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

 Phone: 760-736-6767  
Fax: 760-720-7204


 After Hours Phone:  
760-736-6767

License Number: PA22667

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

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


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### TRUECARE

Provider ID: 480120

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

 Phone: 760-736-6767  
 After Hours Phone:


760-736-6767

License Number: A131678

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: A49273

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

After Hours Phone:

760-736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

## CHULA VISTA

### CHULA VISTA PEDIATRICS

Provider ID: 482034

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

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A49591

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-4:00PM  
MO 9:00AM-4:00PM  
TU 9:00AM-4:00PM  
WE 9:00AM-4:00PM  
TH 9:00AM-4:00PM  
FR 9:00AM-4:00PM  
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **CHULA VISTA PEDIATRICS**

*Provider ID: 482034*

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

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A82912*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes  
Cultural Competency: No*

 *Hours: SU 9:00AM-4:00PM  
MO 9:00AM-4:00PM  
TU 9:00AM-4:00PM  
WE 9:00AM-4:00PM  
TH 9:00AM-4:00PM  
FR 9:00AM-4:00PM  
SA 9:00AM-4:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*


### **CHULA VISTA PEDIATRICS**

*Provider ID: 482034*

 855 3RD AVE STE 2200

CHULA VISTA, CA  
91911-1353

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: C51110*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes  
Cultural Competency: No*

 *Hours: SU 9:00AM-4:00PM  
MO 9:00AM-4:00PM  
TU 9:00AM-4:00PM  
WE 9:00AM-4:00PM  
TH 9:00AM-4:00PM  
FR 9:00AM-4:00PM  
SA 9:00AM-4:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **CHULA VISTA PEDIATRICS**

*Provider ID: 482034*

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

 *Phone: 619-662-4100*

*Fax: 619-662-4196*


 *After Hours Phone:  
619-662-4100*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes  
Cultural Competency: No*

 *Hours: SU 9:00AM-4:00PM  
MO 9:00AM-4:00PM  
TU 9:00AM-4:00PM  
WE 9:00AM-4:00PM  
TH 9:00AM-4:00PM  
FR 9:00AM-4:00PM  
SA 9:00AM-4:00PM*

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


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID: 427322*

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736


 *Phone: 619-662-4100*


 *After Hours Phone:  
619-662-4100*

*License Number: A80185*

*NPI: 1598122871*

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



 *Site English Spoken: Yes  
Cultural Competency: No*

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所



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

 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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


License Number: A87650

NPI: 1598122871



Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


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



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

 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: A93785

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

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


 **Accessibility: CONTACT PROVIDER**



Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100  
 After Hours Phone:

619-662-4100


License Number: C55563

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

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


 **Accessibility: CONTACT PROVIDER**



Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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


License Number: DC20760

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: DC31963

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):


N


 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: DC33295

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: DDS102880  
NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G57243


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

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

 Phone: 619-205-1360

 After Hours Phone:  
619-205-1360

License Number: A95959


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

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

 Phone: 619-205-1376

 After Hours Phone:  
619-205-1376

License Number: A179598


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

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

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A123170

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

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

 Phone: 619-662-4100

Fax: 619-336-2323

 After Hours Phone:  
619-662-4100


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

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


N  
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A47906


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


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


N  
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A50477


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A56153

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗣️ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID:* 427322

📍 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

📞 *Phone:* 619-662-4100

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A66903

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗣️ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID:* 427322

📍 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

📞 *Phone:* 619-662-4100

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A69264

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗣️ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID:* 427322

📍 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

📞 *Phone:* 619-662-4100

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A77936

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗣️ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA


🌐 *Website:* www.ihpsocal.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A11087

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:


619-662-4100

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 20A13225

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 20A14025

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

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

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: G74728

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: G80234

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Yes  
Cultural Competency: No

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






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。










## B. 联邦合资质的健康诊所

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



### **SAN YSIDRO HEALTH CHULA VISTA**




Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP12112  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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





**VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP95015413  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

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


 After Hours Phone:  
619-662-4100  
License Number: PA54404  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

**SAN YSIDRO HEALTH CHULA VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: SP18192  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100


Fax: 619-425-1184

 After Hours Phone:  
619-662-4100

NPI: 1598122871

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

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: 20A19485


NPI: 1598122871

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

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: 20A9060

NPI: 1598122871

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


Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

619-662-4100  
License Number: A106103  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

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

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

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A114600  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

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

American Sign Language (ASL):  
N

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

### **SAN YSIDRO HEALTH CHULA VISTA**

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

License Number: A114893  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):  
N

Accessibility: CONTACT

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

### **SAN YSIDRO HEALTH CHULA VISTA**

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

License Number: A115598  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N








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

### **SAN YSIDRO HEALTH CHULA VISTA**



Provider ID: 427322

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所






 678 3RD AVE  
 CHULA VISTA, CA  
 91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100  
 License Number: A115699  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322  
 678 3RD AVE  
 CHULA VISTA, CA  
 91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100  
 License Number: A120584  
 NPI: 1598122871  
 Accepting New Patients: Yes








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

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322  
 678 3RD AVE  
 CHULA VISTA, CA  
 91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100  
 License Number: A120672  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM

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

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322  
 678 3RD AVE  
 CHULA VISTA, CA  
 91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100  
 License Number: A121861  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A123263

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A123492

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A123604

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Yes  
Cultural Competency: No

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






American Sign Language (ASL):  
N



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所






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


### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID: 427322*  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: A134303*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*



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



### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID: 427322*  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: A138474*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

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






### **SAN YSIDRO HEALTH CHULA VISTA**

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

*619-662-4100*  
*License Number: A138534*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

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

### **SAN YSIDRO HEALTH CHULA VISTA**

*Provider ID: 427322*  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: A159831*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A162816

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):


N


 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A163183

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A164392

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A177922

NPI: 1598122871

Accepting New Patients: Yes


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A40061


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

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


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A40473


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL): **FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A41486


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**

Provider ID: 417641

 352 L ST  
CHULA VISTA, CA  
91911-1208

 Phone: 619-515-2325

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
619-515-2325  
*License Number:* A144995  
*NPI:* 1134155377  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

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

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

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

🌐 *Website:* www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**

*Provider ID:* 417641

📍 352 L ST  
CHULA VISTA, CA  
91911-1208

☎ *Phone:* 619-515-2325

☎ *After Hours Phone:*  
619-515-2325

*License Number:* PA19306

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes

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

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

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

### **FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**

*Provider ID:* 417641

📍 352 L ST  
CHULA VISTA, CA  
91911-1208

☎ *Phone:* 619-515-2325

*Fax:* 619-420-0660

☎ *After Hours Phone:*  
619-515-2325

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

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

🌐 *Website:* www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**

*Provider ID:* 417641

📍 352 L ST  
CHULA VISTA, CA  
91911-1208

☎ *Phone:* 619-515-2325

*Fax:* 619-420-0660

☎ *After Hours Phone:*  
619-515-2325

*License Number:* 550002305

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: 20A11535

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA

91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A108228

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A113001

NPI: 1134155377

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A148014

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

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

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A153344

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

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

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE

CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A154298

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A163464

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL): HEALTH CENTERS OF SAN

DIEGO

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A177698

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A178499

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A68463*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A72005*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A73172*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: A78355  
NPI: 1134155377

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

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

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: DC26269

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
⌚ Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

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

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: G78814*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NM792*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NP10943*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: NP23687

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: NP95001964

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NP95013978*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: PA21591*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: PT291706*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*


*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: PT292823

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: PT294245

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：blueshieldca.com/promise/medical。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: PT37189*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*


*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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

 *Website: www.fhcsd.org*


### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

*Fax: 619-397-1161*

 *After Hours Phone: 619-515-2500*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **CHULA VISTA FAMILY HLTH CTR**

*Provider ID: 206355*

 252 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A116680*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*


### **EL CAJON**

### **CHASE AVENUE FAMILY HEALTH CTRS INC**

*Provider ID: 206354*

 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

 *Phone: 619-515-2499*

 *After Hours Phone:*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

619-515-2499  
License Number: 20A13700  
NPI: 1134155377

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

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

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

1111 W CHASE AVE  
EL CAJON, CA 92020-5710

Phone: 619-515-2499

After Hours Phone:  
619-515-2499

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

1111 W CHASE AVE  
EL CAJON, CA 92020-5710

Phone: 619-515-2499

After Hours Phone:  
619-515-2499

License Number: A138887

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

1111 W CHASE AVE  
EL CAJON, CA 92020-5710

Phone: 619-515-2499

After Hours Phone:  
619-515-2499

License Number: A170055

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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


American Sign Language (ASL):  
N




Accessibility: CONTACT


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所




**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**CHASE AVENUE FAMILY  
HEALTH CTRS INC**  
Provider ID: 206354  
 1111 W CHASE AVE  
EL CAJON, CA 92020-5710  
 Phone: 619-515-2499  
 After Hours Phone:  
619-515-2499  
License Number: DC33150  
NPI: 1134155377


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

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

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



**CHASE AVENUE FAMILY  
HEALTH CTRS INC**  
Provider ID: 206354  
 1111 W CHASE AVE  
EL CAJON, CA 92020-5710  
 Phone: 619-515-2499  
 After Hours Phone:  
619-515-2499  
License Number: NP95007253  
NPI: 1134155377


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

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

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**CHASE AVENUE FAMILY  
HEALTH CTRS INC**  
Provider ID: 206354  
 1111 W CHASE AVE  
EL CAJON, CA 92020-5710  
 Phone: 619-515-2499

Fax: 619-593-7164  
 After Hours Phone:  
619-515-2499  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SAN  
DIEGO-EL CAJON**  
Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: RN810863  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

- Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org
- FAMILY HLTH CTR SAN DIEGO-EL CAJON**  
Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
Fax: 619-269-0191  
 After Hours Phone: 619-515-2498  
License Number: 20A19473  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org
- FAMILY HLTH CTR SAN DIEGO-EL CAJON**  
Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
Fax: 619-269-0191  
 After Hours Phone: 619-515-2498  
License Number: 550003553  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org
- FAMILY HLTH CTR SAN DIEGO-EL CAJON**  
Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
Fax: 619-269-0191  
 After Hours Phone: 619-515-2498  
License Number: 20A19473  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所



 Phone: 619-515-2499  
 After Hours Phone:  
619-515-2499  
License Number: RN428876  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None


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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)


### FAMILY HLTH CTR SAN DIEGO-EL CAJON



Provider ID: 418340  
 526 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: A163464  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes

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



American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### CENTRO MEDICO EL CAJON




Provider ID: 478971  
 133 W MAIN ST STE 100  
EL CAJON, CA 92020-3325  
 Phone: 619-401-0404  
 After Hours Phone:  
619-401-0404  
License Number: A151547  
NPI: 1134144165



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



American Sign Language (ASL):  
N

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

### CENTRO MEDICO EL CAJON

Provider ID: 478971  
 133 W MAIN ST STE 100  
EL CAJON, CA 92020-3325  
 Phone: 619-401-0404  
 After Hours Phone:  
619-401-0404  
License Number: A158569  
NPI: 1134144165

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

































American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  
 Website: N/A

### CENTRO MEDICO EL CAJON

Provider ID: 478971

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p> 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p> <p> Phone: 619-401-0404</p> <p> After Hours Phone: 619-401-0404</p> <p>License Number: A98486 NPI: 1134144165</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p> Site English Spoken: Yes</p> <p> Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION</p> <p> Website: N/A</p>
<p> Site English Spoken: Yes</p> <p> Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION</p> <p> Website: N/A</p>	<p><b>CENTRO MEDICO EL CAJON</b> Provider ID: 478971</p> <p> 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p> <p> Phone: 619-873-8940</p> <p> After Hours Phone: 619-873-8940</p> <p>License Number: 20A11733 NPI: 1134144165</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>
<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION</p> <p> Website: N/A</p>	<p><b>CENTRO MEDICO EL CAJON</b> Provider ID: 478971</p> <p> 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p> <p> Phone: 619-401-0404</p> <p> After Hours Phone: 619-401-0404</p> <p>License Number: NP95001710 NPI: 1134144165</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p> Site English Spoken: Yes</p> <p> Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p>
<p><b>CENTRO MEDICO EL CAJON</b> Provider ID: 478971</p> <p> 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p> <p> Phone: 619-401-0404</p> <p> After Hours Phone: 619-401-0404</p> <p>License Number: G52812 NPI: 1134144165</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p> Site English Spoken: Yes</p> <p> Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL):</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION</p> <p> Website: N/A</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:  
619-873-8940

License Number: A113241


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION


 Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:  
619-873-8940

License Number: A114674


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION

 Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:  
619-873-8940

License Number: DPM1536


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION

 Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:  
619-873-8940

License Number: PA16673


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522


 After Hours Phone:  
619-873-8940

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDATION

 Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522

 After Hours Phone:  
619-873-8940


License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: Yes

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDATION


 Website: N/A

### **LA MAESTRA CHC EL CAJON BROADWAY**

Provider ID: 418501

 1032 BROADWAY  
EL CAJON, CA 92021-7416

 Phone: 619-795-5991


 After Hours Phone:  
619-795-5991


License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### **LA MAESTRA CHC EL CAJON BROADWAY**

Provider ID: 418501

 1032 BROADWAY  
EL CAJON, CA 92021-7416

 Phone: 619-795-5991


 After Hours Phone:  
619-795-5991

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416  
Phone: 619-795-5991  
After Hours Phone:  
619-795-5991

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416  
Phone: 619-795-5991  
After Hours Phone:  
619-795-5991

License Number: G50634

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416  
Phone: 619-795-5991  
After Hours Phone:  
619-795-5991

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416  
Phone: 619-795-5991  
After Hours Phone:  
619-795-5991

License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes



Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No





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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 8:30AM-5:30PM  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)


### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501  
 1032 BROADWAY  
 EL CAJON, CA 92021-7416  
 Phone: 619-795-5991  
 Fax: 619-795-5992  
 After Hours Phone: 619-795-5991  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
 MO 8:30AM-5:30PM  
 TU 8:30AM-5:30PM  
 WE 8:30AM-5:30PM  
 TH 8:30AM-5:30PM  
 FR 8:30AM-5:30PM  
 SA 8:30AM-5:30PM

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)


### LA MAESTRA CHC EL CAJON BROADWAY




Provider ID: 418501  
 1032 BROADWAY  
 EL CAJON, CA 92021-7416  
 Phone: 619-795-5991  
 Fax: 619-795-5992  
 After Hours Phone: 619-795-5991  
 License Number: 550003567  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
 MO 8:30AM-5:30PM  
 TU 8:30AM-5:30PM  
 WE 8:30AM-5:30PM  
 TH 8:30AM-5:30PM  
 FR 8:30AM-5:30PM  
 SA 8:30AM-5:30PM



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

Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267  
 165 S 1ST ST  
 EL CAJON, CA 92019-4795

 Phone: 619-269-1262  
 After Hours Phone: 619-269-1262  
 License Number: C55979  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
 MO 9:00AM-5:00PM  
 TU 9:00AM-5:00PM  
 WE 9:00AM-5:00PM  
 TH 9:00AM-5:00PM  
 FR 9:00AM-5:00PM  
 SA 9:00AM-5:00PM

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267  
 165 S 1ST ST  
 EL CAJON, CA 92019-4795  
 Phone: 619-312-0347  
 After Hours Phone: 619-312-0347  
 License Number: 20A14222  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*

 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185267*

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

*License Number: 20A6433*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


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

*American Sign Language (ASL):*

*N*




 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*

 *Website: www.lamaestra.org*

### **LA MAESTRA CHC EL CAJON BROADWAY**

*Provider ID: 418501*

 1032 BROADWAY  
EL CAJON, CA 92021-7416  
 *Phone: 619-795-5991*  
 *After Hours Phone: 619-795-5991*

*License Number: A160760*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*


 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185267*

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

 *Phone: 619-312-0347*

 *After Hours Phone: 619-312-0347*


*License Number: A123929*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*


 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185267*

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

 *Phone: 619-312-0347*

 *After Hours Phone: 619-312-0347*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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

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

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

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

License Number: PA58466

NPI: 1609849074

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

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

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

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

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

License Number: G45632

NPI: 1609849074

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

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

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: PT293536

NPI: 1134155377

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

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

American Sign Language (ASL):  
N

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

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

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

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

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


License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

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

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A107093

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No



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

American Sign Language (ASL):






N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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




### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**



*Provider ID: 418340*  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 *Phone: 619-515-2498*  
 *After Hours Phone: 619-515-2498*  
*License Number: A114181*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*


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


### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

*Provider ID: 418340*  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 *Phone: 619-515-2498*  
 *After Hours Phone: 619-515-2498*  
*License Number: A116680*  
*NPI: 1134155377*

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



*American Sign Language (ASL): N*

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



 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**






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

*License Number: A118095*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*

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

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

*Provider ID: 418340*  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 *Phone: 619-515-2498*  
 *After Hours Phone: 619-515-2498*  
*License Number: A127798*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A134303

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


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


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A138815

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A144974

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

License Number: A146838  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):

N

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



### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

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

License Number: A147976  
NPI: 1134155377



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

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

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

American Sign Language (ASL):

N

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


### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

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

License Number: A148014  
NPI: 1134155377

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

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

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

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



License Number: A152462  
NPI: 1134155377

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

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

American Sign Language (ASL):

N

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: A175325

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A83390

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: C174771


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


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


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: DC33869

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: DPM5661

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: G78814  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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



American Sign Language (ASL):

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

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

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

License Number: NM1721  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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



TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

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

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**


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

License Number: NP15444  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):


N  
 Accessibility: CONTACT

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

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

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

License Number: NP95000205  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: NP95009180

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所




**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **FAMILY HLTH CTR SAN DIEGO-EL CAJON**

Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: NP95021154  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM


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



Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SAN  
DIEGO-EL CAJON**  
Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: PA20396  
NPI: 1134155377






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

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

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

License Number: PA23258  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)


**FAMILY HLTH CTR SAN  
DIEGO-EL CAJON**  
Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: PT292482  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

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

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 20A10964

NPI: 1598122871

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

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

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

619-662-4100  
License Number: 550002514  
NPI: 1598122871

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

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A101773

NPI: 1598122871

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

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: A101888

NPI: 1598122871

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

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

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

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

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: A120584

NPI: 1598122871

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

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A127706

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A131365

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A134995

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A40473

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog



Cultural Competency: No

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

<p>TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>SOUTHERN CALIFORNIA</p> <p> Website: N/A</p> <p><b>SAN YSIDRO HEALTH EL CAJON</b></p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A79338 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A87650 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>
<p><b>SAN YSIDRO HEALTH EL CAJON</b></p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A47906 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p><input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF</p>	<p><b>SAN YSIDRO HEALTH EL CAJON</b></p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD</p>	<p><b>SAN YSIDRO HEALTH EL CAJON</b></p> <p>Provider ID: 569910</p> <p> 875 EL CAJON BLVD EL CAJON, CA 92020-5714</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A96002 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: G43179

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: NP95009329

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH EL CAJON**

Provider ID: 569910

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

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



License Number: NP95012943  
NPI: 1598122871

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

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910


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

License Number: PT40025  
NPI: 1598122871



Accepting New Patients: Yes

Min/Max Age: 0\None

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### SAN YSIDRO HEALTH EL CAJON


Provider ID: 569910

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

License Number: PT42665  
NPI: 1598122871



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

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

Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

## ENCINITAS


### TRUECARE

Provider ID: 480243

 1130 2ND ST  
ENCINITAS, CA  
92024-5008  
 Phone: 760-736-6767  
 After Hours Phone:  
760-736-6767

License Number: 20A17306  
NPI: 1598122871

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: DC29074

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: PA19437

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### TRUECARE

Provider ID: 480243  
1130 2ND ST  
ENCINITAS, CA  
92024-5008  
Phone: 760-753-7842  
After Hours Phone:  
760-753-7842  
License Number: A103940  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### TRUECARE

Provider ID: 480243  
1130 2ND ST  
ENCINITAS, CA

92024-5008  
Phone: 760-753-7842  
After Hours Phone:  
760-753-7842  
License Number: A116562  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### TRUECARE

Provider ID: 480243  
1130 2ND ST  
ENCINITAS, CA  
92024-5008  
Phone: 760-753-7842  
After Hours Phone:  
760-753-7842  
License Number: C54157  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes

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

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

### TRUECARE

Provider ID: 480243  
1130 2ND ST  
ENCINITAS, CA  
92024-5008  
Phone: 760-753-7842  
Fax: 760-736-8740  
After Hours Phone:  
760-753-7842  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: N/A*

### TRUECARE

*Provider ID: 480243*

 1130 2ND ST  
ENCINITAS, CA  
92024-5008

 *Phone: 760-753-7842*

*Fax: 760-736-8740*

 *After Hours Phone:  
760-753-7842*


*License Number: 80000638*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: N/A*


### ESCONDIDO

#### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941*

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: NP95005999*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: N/A*


#### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941*

 704 E GRAND AVE

ESCONDIDO, CA  
92025-4405

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*


*License Number: NP95006360*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: N/A*

#### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

*Provider ID: 588941*

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: PA20490*

*NPI: 1598122871*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

Phone: 619-662-4100

Fax: 619-662-7952

After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: C171064

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


Website: N/A


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G58033

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100

License Number: 20A14292

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100


 After Hours Phone:  
760-520-8100


License Number: A107557

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100


 After Hours Phone:  
760-520-8100


License Number: A109655

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No



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

American Sign Language (ASL):






N



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所






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

### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

*Provider ID: 206270*  
 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
 *Phone: 760-520-8100*  
 *After Hours Phone: 760-520-8100*  
*License Number: A119661*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*




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



### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**


*Provider ID: 206270*  
 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
 *Phone: 760-520-8100*  
 *After Hours Phone: 760-520-8100*  
*License Number: A120771*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

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






### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

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

*760-520-8100*  
*License Number: A139490*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

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

### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

*Provider ID: 206270*  
 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
 *Phone: 760-520-8100*  
 *After Hours Phone: 760-520-8100*  
*License Number: A152372*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100


License Number: A159727

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


### PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100

License Number: A45413

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

 Phone: 760-737-6900

 After Hours Phone:  
760-737-6900


License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY


Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 Phone: 760-737-6900

 After Hours Phone:  
760-737-6900

License Number: NP8169


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

 After Hours Phone:  
760-737-6900


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

 After Hours Phone:  
760-737-6900

License Number: 80000158


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409

 Phone: 760-690-5900

 After Hours Phone:  
760-690-5900

License Number: A56054


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


*SOUTHERN CALIFORNIA*


 Website: N/A

### **NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409

 Phone: 760-690-5900

 After Hours Phone:  
760-690-5900

License Number: A62467

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409

 Phone: 760-690-5900

 After Hours Phone:  
760-690-5900


License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409

 Phone: 760-690-5900


 After Hours Phone:  
760-690-5900

License Number: G83438

NPI: 1598122871


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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **NEIGHBORHOOD HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100


 After Hours Phone:  
760-520-8100

License Number: A61751

NPI: 1598122871




















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

 Site English Spoken: Yes  
Cultural Competency: No

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Website: www.ihpsocal.org <b>NEIGHBORHOOD HEALTHCARE ESCONDIDO</b> Provider ID: 206270  460 N ELM ST ESCONDIDO, CA 92025-3002  Phone: 760-520-8100  After Hours Phone: 760-520-8100 License Number: A82173 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Phone: 760-520-8100  After Hours Phone: 760-520-8100 License Number: A94128 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>NEIGHBORHOOD HEALTHCARE ESCONDIDO</b> Provider ID: 206270  460 N ELM ST ESCONDIDO, CA 92025-3002  Phone: 760-520-8100  After Hours Phone: 760-520-8100 License Number: A78116 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	<b>NEIGHBORHOOD HEALTHCARE ESCONDIDO</b> Provider ID: 206270  460 N ELM ST ESCONDIDO, CA 92025-3002	<b>NEIGHBORHOOD HEALTHCARE ESCONDIDO</b> Provider ID: 206270  460 N ELM ST ESCONDIDO, CA 92025-3002  Phone: 760-520-8100  After Hours Phone: 760-520-8100 License Number: DC12036 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*


### **NEIGHBORHOOD**

#### **HEALTHCARE ESCONDIDO**

*Provider ID: 206270*

 *460 N ELM ST  
ESCONDIDO, CA  
92025-3002*

 *Phone: 760-520-8100*

 *After Hours Phone:  
760-520-8100*


*License Number: DC28605*

*NPI: 1598122871*

*Accepting New Patients: Yes*


*Min/Max Age: 0\None*

*Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*


### **NEIGHBORHOOD**

#### **HEALTHCARE ESCONDIDO**

*Provider ID: 206270*

 *460 N ELM ST  
ESCONDIDO, CA  
92025-3002*

 *Phone: 760-520-8100*

 *After Hours Phone:  
760-520-8100*

*License Number: G61829*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **NEIGHBORHOOD**


#### **HEALTHCARE ESCONDIDO**

*Provider ID: 206270*

 *460 N ELM ST  
ESCONDIDO, CA  
92025-3002*

 *Phone: 760-520-8100*

*Fax: 360-466-2745*


 *After Hours Phone:  
760-520-8100*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **NEIGHBORHOOD**

#### **HEALTHCARE ESCONDIDO**

*Provider ID: 206270*


 *460 N ELM ST  
ESCONDIDO, CA  
92025-3002*

 *Phone: 760-520-8100*

*Fax: 360-466-2745*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 After Hours Phone:  
760-520-8100  
License Number: 80000397  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604


 Phone: 760-520-8200


 After Hours Phone:  
760-520-8200

License Number: A101773

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409


 Phone: 760-690-5900

 After Hours Phone:  
760-690-5900

License Number: NP4799



NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No


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


American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A


### NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409


 Phone: 760-690-5900


Fax: 360-462-2747

 After Hours Phone:  
760-690-5900

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### NEIGHBORHOOD

#### HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

426 N DATE ST  
ESCONDIDO, CA  
92025-3409

Phone: 760-690-5900

Fax: 360-462-2747

After Hours Phone:  
760-690-5900

License Number: 550000511

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### NEIGHBORHOOD

#### HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

728 E VALLEY PKWY  
ESCONDIDO, CA

92025-3052

Phone: 760-737-6900

After Hours Phone:  
760-737-6900

License Number: A120348

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### NEIGHBORHOOD

#### HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

Phone: 760-737-6900

After Hours Phone:  
760-737-6900

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### NEIGHBORHOOD

#### HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

Phone: 760-737-6900

After Hours Phone:  
760-737-6900

License Number: A140398

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

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




### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271  
 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: A145349  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


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

SOUTHERN CALIFORNIA  
 Website: N/A



### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271  
 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900

License Number: A161074  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None






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

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY




Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: A94128  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271  
 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: DPM5260  
NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE


Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone: 760-520-8200

License Number: A161074


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE


Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone: 760-520-8200

License Number: A94128


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE


Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

 After Hours Phone: 760-520-8200

License Number: PA51508


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

### NEIGHBORHOOD

#### HEALTHCARE GRAND AVE

Provider ID: 206269


 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:

760-520-8200


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:

760-520-8200

License Number: 550000697


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:

760-520-8200

License Number: 80000397


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE

ESCONDIDO, CA

92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:

760-520-8200

License Number: 80000483


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE PEDIATRIC AND PRENATAL

Provider ID: 206266

 425 N DATE ST  
ESCONDIDO, CA  
92025-3413

 Phone: 760-520-8340

 After Hours Phone:  
760-520-8340

License Number: A56054


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### NEIGHBORHOOD HEALTHCARE PEDIATRIC AND PRENATAL

Provider ID: 206266

 425 N DATE ST

ESCONDIDO, CA  
92025-3413

 Phone: 760-520-8340

 After Hours Phone:  
760-520-8340

License Number: A67626


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE PEDIATRIC AND PRENATAL

Provider ID: 206266

 425 N DATE ST  
ESCONDIDO, CA  
92025-3413

 Phone: 760-520-8340

Fax: 360-462-2752


 After Hours Phone:

760-520-8340

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

## FALLBROOK

### VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST  
FALLBROOK, CA  
92028-2912

 Phone: 760-723-6200


 After Hours Phone:  
760-723-6200


License Number: NP95003447

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## B. 联邦合资质的健康诊所

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








 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### FALLBROOK FAMILY HLTH CTR





Provider ID: 183910  
 1328 S MISSION RD  
FALLBROOK, CA  
92028-4006  
 Phone: 760-451-4720  
Fax: 760-451-4700  
 After Hours Phone:  
760-451-4720  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 **Accessibility: CONTACT PROVIDER**


PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### FALLBROOK FAMILY HLTH CTR

Provider ID: 183910  
 1328 S MISSION RD  
FALLBROOK, CA  
92028-4006  
 Phone: 760-451-4720  
Fax: 760-451-4700  
 After Hours Phone:  
760-451-4720  
License Number: 80000150  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  Website: N/A  
N  
 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### FALLBROOK FAMILY HLTH CTR


Provider ID: 183910  
 1328 S MISSION RD  
FALLBROOK, CA  
92028-4006  
 Phone: 760-451-4770  
 After Hours Phone:  
760-451-4770  
License Number: A169529  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### IMPERIAL BEACH




### IMPERIAL BEACH HEALTH CENTER



Provider ID: 179678  
 949 PALM AVE  
IMPERIAL BEACH, CA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。









## B. 联邦合资质的健康诊所

91932-1503  
 Phone: 619-429-3733  
 After Hours Phone:  
619-429-3733  
License Number: A51447  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)





### IMPERIAL BEACH HEALTH CENTER


Provider ID: 179678  
 949 PALM AVE  
IMPERIAL BEACH, CA  
91932-1503  
 Phone: 619-429-3733  
 After Hours Phone:  
619-429-3733  
License Number: A66830  
NPI: 1598122871  
Accepting New Patients: Yes

Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### LA MESA

#### LA MESA PEDIATRICS

Provider ID: 480827  
 8881 FLETCHER PKWY STE  
200  
LA MESA, CA 91942-3135  
 Phone: 619-464-6434  
 After Hours Phone:  
619-464-6434  
License Number: NP95017921  
NPI: 1134144165  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM

WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDATION  
 Website: N/A

#### LA MESA PEDIATRICS

Provider ID: 480827  
 8881 FLETCHER PKWY STE  
200  
LA MESA, CA 91942-3135  
 Phone: 619-464-6434  
Fax: 619-464-5109  
 After Hours Phone:  
619-464-6434  
NPI: 1134144165

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: BORREGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### COMMUNITY HEALTH FOUNDTION


 Website: N/A

### LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:  
619-464-6434


License Number: 20A11733

NPI: 1134144165


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION

 Website: N/A


### LA MESA PEDIATRICS

Provider ID: 480827


 8881 FLETCHER PKWY STE

200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:  
619-464-6434

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: Yes

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION


 Website: N/A

### LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109


 After Hours Phone:  
619-464-6434

License Number: A113241

NPI: 1134144165

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION


 Website: N/A

### LA MESA PEDIATRICS


Provider ID: 480827

 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942-3135

 Phone: 619-464-6434


Fax: 619-464-5109


 After Hours Phone:  
619-464-6434

License Number: A89865

NPI: 1134144165

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



 Site English Spoken: Yes  
Cultural Competency: No

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






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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

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






### LA MESA PEDIATRICS



Provider ID: 480827  
 8881 FLETCHER PKWY STE 200  
LA MESA, CA 91942-3135  
 Phone: 619-464-6434  
Fax: 619-464-5109  
 After Hours Phone: 619-464-6434  
License Number: C133872  
NPI: 1134144165  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N

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






### LAKESIDE

#### NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843  
 10039 VINE ST  
LAKESIDE, CA 92040-3120  
 Phone: 858-218-3000  
 After Hours Phone: 858-218-3000  
License Number: A152372  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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


#### NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843  
 10039 VINE ST  
LAKESIDE, CA 92040-3120  
 Phone: 858-218-3000  
 After Hours Phone: 858-218-3000  
License Number: A43914  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

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

#### NEIGHBORHOOD HEALTHCARE LAKESIDE

Provider ID: 353843  
 10039 VINE ST  
LAKESIDE, CA 92040-3120  
 Phone: 858-218-3000  
 After Hours Phone: 858-218-3000  
License Number: A75411

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST  
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

After Hours Phone:  
858-218-3000

License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST  
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

Fax: 360-462-2744

After Hours Phone:  
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST  
LAKESIDE, CA 92040-3120

Phone: 858-218-3000

Fax: 360-462-2744

After Hours Phone:  
858-218-3000

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### LEMON GROVE

#### LEMON GROVE FAMILY HEALTH CENTER







Provider ID: 419139




7592 BROADWAY  
LEMON GROVE, CA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所







91945-1604  
 Phone: 619-515-2500  
 After Hours Phone:  
619-515-2500  
License Number: G78814  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: N/A

**LEMON GROVE FAMILY  
HEALTH CENTER**  
Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: 20A11535  
NPI: 1134155377  
Accepting New Patients: Yes

Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: N/A

**LEMON GROVE FAMILY  
HEALTH CENTER**  
Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: 20A14919  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM

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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: A107323

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A


### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

Fax: 619-825-9577

 After Hours Phone:  
619-515-2550

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A


### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

Fax: 619-825-9577

 After Hours Phone:  
619-515-2550


License Number: 550001268

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



 Site English Spoken: Yes  
Cultural Competency: No

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





了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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







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

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A113001  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N

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

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A114181  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER


Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A116680  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER


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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 After Hours Phone:  
619-515-2550  
License Number: A118095  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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


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


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


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A148014


NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes


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


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


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

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A154298

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

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


American Sign Language (ASL):  
N


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


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: A154838

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

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

American Sign Language (ASL):  
N

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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A


### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA

91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A165925

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No



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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。










## B. 联邦合资质的健康诊所

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

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




### LEMON GROVE FAMILY HEALTH CENTER



Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone: 619-515-2550  
License Number: A68463  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO

### LEMON GROVE FAMILY HEALTH CENTER

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

License Number: A72005  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

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


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

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone: 619-515-2550  
License Number: C172318  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL): N

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

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone: 619-515-2550  
License Number: C174771  
NPI: 1134155377

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: NP95001050

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: NP95008782

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: NP95009933

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: PA12416

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

Phone: 619-515-2550

After Hours Phone:  
619-515-2550

License Number: PA56072

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

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

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: RN428876


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

### NATIONAL CITY

#### SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST  
NATIONAL CITY, CA  
91950-2312

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


#### SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST  
NATIONAL CITY, CA

91950-2312

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

#### SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST  
NATIONAL CITY, CA  
91950-2312

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST  
NATIONAL CITY, CA  
91950-2312

 Phone: 619-662-4100


Fax: 619-259-2807


 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-280-4213


 After Hours Phone:  
619-280-4213

License Number: A167184

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-434-7308


 After Hours Phone:  
619-434-7308


License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC


Provider ID: 185270


 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 Phone: 619-434-7308

 After Hours Phone:  
619-434-7308

License Number: A123929


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-434-7308

 After Hours Phone:  
619-434-7308

License Number: C55979


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-434-7308

 After Hours Phone:  
619-434-7308

License Number: G45632


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-434-7308

Fax: 619-434-7310

 After Hours Phone:

619-434-7308

License Number: NP95013257


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


### MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-564-8765

 After Hours Phone:  
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-798-3977

 After Hours Phone:  
619-798-3977

License Number: A41375

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

 Phone: 844-200-2426

 After Hours Phone:  
844-200-2426

License Number: A74777


NPI: 1801907449

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

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM  
FR 8:00AM-6:00PM  
SA 8:00AM-6:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

 Phone: 844-200-2426

 After Hours Phone:  
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

🕒 Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM  
FR 8:00AM-6:00PM  
SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

📍 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

☎ Phone: 844-200-2426

🕒 After Hours Phone:  
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM  
FR 8:00AM-6:00PM

SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

📍 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

☎ Phone: 844-200-2426

Fax: 619-474-3919

🕒 After Hours Phone:  
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM  
FR 8:00AM-6:00PM  
SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

📍 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

☎ Phone: 844-200-2426

Fax: 619-474-3919

🕒 After Hours Phone:  
844-200-2426

License Number: 90000183

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM  
FR 8:00AM-6:00PM  
SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### OPERATION SAMAHAN

#### GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE  
NATIONAL CITY, CA  
91950-6208

Phone: 844-200-2426

After Hours Phone:  
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN

#### GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE  
NATIONAL CITY, CA  
91950-6208

Phone: 844-200-2426

Fax: 619-434-8999

After Hours Phone:  
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN

#### GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE  
NATIONAL CITY, CA  
91950-6208

Phone: 844-200-2426

Fax: 619-434-8999

After Hours Phone:  
844-200-2426

License Number: 550002622

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### SAN YSIDRO HEALTH

#### NATIONAL CITY

Provider ID: 227412

1136 D AVE  
NATIONAL CITY, CA  
91950-3412

Phone: 619-336-2300

After Hours Phone:  
619-336-2300

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 8:00AM-5:00PM  
American Sign Language (ASL): **SAN YSIDRO HEALTH**

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH  
NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-428-4463

 After Hours Phone:  
619-428-4463


License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

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

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH**

**NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A138919

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH  
NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A165184

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C55180


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

Fax: 619-336-2323

 After Hours Phone:  
619-662-4100


NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

Fax: 619-336-2323

 After Hours Phone:  
619-662-4100

License Number: A112571


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Fax: 619-474-3722

☎ After Hours Phone:  
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

☎ Phone: 619-662-4100

Fax: 619-474-3722

☎ After Hours Phone:  
619-662-4100

License Number: G46444

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

📍 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

☎ Phone: 619-662-4100

☎ After Hours Phone:  
619-662-4100

License Number: A118227

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

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

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

📍 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

☎ Phone: 619-662-4100

☎ After Hours Phone:  
619-662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A146819

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A157488

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A167529

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: G88347

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

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

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH PARADISE HILLS**

*Provider ID: 227418*

 *2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956*

 *Phone: 619-662-4100  
Fax: 619-259-2806*

 *After Hours Phone:  
619-662-4100*

*License Number: 20A11518*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Tagalog, Spanish*

*Cultural Competency: No*

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

*FR 8:00AM-5:00PM*

*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*

*N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH PARADISE HILLS**

*Provider ID: 227418*

 *2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956*

 *Phone: 619-662-4100  
Fax: 619-259-2807*

 *After Hours Phone:  
619-662-4100*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Tagalog, Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF*


*SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH PARADISE HILLS**

*Provider ID: 227418*

 *2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956*

 *Phone: 619-662-4100  
Fax: 619-259-2807*

 *After Hours Phone:  
619-662-4100*

*License Number: A113624*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Tagalog, Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH**

#### **PARADISE HILLS**

Provider ID: 227418

2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

Phone: 619-662-4100

Fax: 619-259-2807

After Hours Phone:  
619-662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

1000 EUCLID AVE  
NATIONAL CITY, CA

91950-3856

Phone: 619-515-2399

After Hours Phone:  
619-515-2399

License Number: 20A18460

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-3:30PM  
MO 8:30AM-3:30PM  
TU 8:30AM-3:30PM  
WE 8:30AM-3:30PM  
TH 8:30AM-3:30PM  
FR 8:30AM-3:30PM  
SA 8:30AM-3:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

Phone: 619-515-2399

After Hours Phone:  
619-515-2399

License Number: A163862

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-3:30PM  
MO 8:30AM-3:30PM  
TU 8:30AM-3:30PM  
WE 8:30AM-3:30PM  
TH 8:30AM-3:30PM  
FR 8:30AM-3:30PM  
SA 8:30AM-3:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

Phone: 619-515-2399

After Hours Phone:  
619-515-2399

License Number: A176878

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes  
Cultural Competency: No


Hours: SU 8:30AM-3:30PM  
MO 8:30AM-3:30PM  
TU 8:30AM-3:30PM  
WE 8:30AM-3:30PM  
TH 8:30AM-3:30PM


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## B. 联邦合资质的健康诊所


FR 8:30AM-3:30PM  
SA 8:30AM-3:30PM  
American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


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


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

 Phone: 619-515-2399

 After Hours Phone:  
619-515-2399

License Number: NP95010663


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM


TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO

### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

 Phone: 619-515-2399

 After Hours Phone:  
619-515-2399

License Number: PA55660


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM


TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

 Phone: 619-515-2399

Fax: 619-269-0053


 After Hours Phone:  
619-515-2399

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HEALTH CTR SD NATIONAL CITY**

Provider ID: 418930

 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

 Phone: 619-515-2399

Fax: 619-269-0053

 After Hours Phone:  
619-515-2399

License Number: 550000465

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### OCEANSIDE

#### TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1

OCEANSIDE, CA

92058-1354

Phone: 760-433-3155

After Hours Phone:

760-433-3155

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

#### TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1

OCEANSIDE, CA

92058-1354

Phone: 760-433-3155

After Hours Phone:

760-433-3155

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

#### TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1

OCEANSIDE, CA

92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

After Hours Phone:

760-433-3155

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

#### TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1

OCEANSIDE, CA

92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
760-433-3155

*License Number:* 80000240  
*NPI:* 1598122871

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

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* N/A

### TRUECARE

*Provider ID:* 480315

📍 3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354

☎ *Phone:* 760-736-6767

☎ *After Hours Phone:*  
760-736-6767

*License Number:* NP21368  
*NPI:* 1598122871

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

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* N/A

### TRUECARE

*Provider ID:* 480315

📍 3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354

☎ *Phone:* 760-891-4667

☎ *After Hours Phone:*  
760-891-4667

*License Number:* A131678  
*NPI:* 1598122871

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

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* N/A

### TRUECARE

*Provider ID:* 296476

📍 605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

☎ *Phone:* 760-757-4566

☎ *After Hours Phone:*  
760-757-4566

*License Number:* C152937  
*NPI:* 1598122871

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

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

*Cultural Competency:* No

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 296476

📍 605 CROUCH ST BLDG C

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

OCEANSIDE, CA  
92054-4415  
☎ Phone: 760-757-4566  
🕒 After Hours Phone:  
760-757-4566  
License Number: PA22667  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### TRUECARE

Provider ID: 296476  
📍 605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415  
☎ Phone: 760-757-4566  
🕒 After Hours Phone:  
760-757-4566  
License Number: PA53036  
NPI: 1598122871  
Accepting New Patients: Yes

Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### TRUECARE

Provider ID: 296476  
📍 605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415  
☎ Phone: 760-757-4566  
Fax: 760-736-8740  
🕒 After Hours Phone:  
760-757-4566  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM

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

### TRUECARE

Provider ID: 296476  
📍 605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415  
☎ Phone: 760-757-4566  
Fax: 760-736-8740  
🕒 After Hours Phone:  
760-757-4566  
License Number: 80000240  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所





**PROVIDER**  
 Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**TRUECARE**  
 Provider ID: 296476  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 Fax: 760-757-3004  
 After Hours Phone:  
 760-757-4566  
 License Number: A66289  
 NPI: 1598122871




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


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

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




**TRUECARE**  
 Provider ID: 296477  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 Fax: 760-757-3004  
 After Hours Phone:  
 760-757-4566  
 License Number: A116562  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

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

**TRUECARE**  
 Provider ID: 296478  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 After Hours Phone:

760-757-4566  
 License Number: NP21368  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT  
 PROVIDER  
 Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**TRUECARE**  
 Provider ID: 296479  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 After Hours Phone:  
 760-757-4566  
 License Number: A64435  
 NPI: 1598122871

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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

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

### VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436  
📍 517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
☎ Phone: 760-631-5000  
🕒 After Hours Phone:  
760-631-5000  
License Number: 20A17371  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
📄 Site English Spoken: Yes  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436  
📍 517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
☎ Phone: 760-631-5000  
🕒 After Hours Phone:  
760-631-5000  
License Number: NP95006826  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
📄 Site English Spoken: Yes  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436  
📍 517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
☎ Phone: 760-631-5000  
🕒 After Hours Phone:  
760-631-5000  
License Number: NP95007885  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
📄 Site English Spoken: Yes  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436  
📍 517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
☎ Phone: 760-631-5000  
📠 Fax: 760-414-3892

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
760-631-5000  
NPI: 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
🌐 *Website:* N/A

### VISTA COMMUNITY CLINIC HORNE STREET

📍 *Provider ID:* 402436  
517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
☎ *Phone:* 760-631-5000  
*Fax:* 760-414-3892

☎ *After Hours Phone:*  
760-631-5000  
*License Number:* 80000745  
NPI: 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
☑ *Site English Spoken:* Yes  
*Cultural Competency:* Yes

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
🌐 *Website:* N/A

### TRUECARE

*Provider ID:* 296476  
📍 605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415  
☎ *Phone:* 760-736-6767  
☎ *After Hours Phone:*  
760-736-6767

*License Number:* 20A7241  
NPI: 1598122871

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

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

*American Sign Language (ASL):*

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

### TRUECARE

*Provider ID:* 296476  
📍 605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415  
☎ *Phone:* 760-736-6767  
☎ *After Hours Phone:*  
760-736-6767

*License Number:* A131678  
NPI: 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

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

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

*American Sign Language (ASL):*

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-757-4566

After Hours Phone:  
760-757-4566

License Number: 20A15689

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

### VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N






Accessibility: CONTACT



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


**PROVIDER**  
 Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)



### VISTA COMMUNITY CLINIC



Provider ID: 206341  
 4700 N RIVER RD  
 OCEANSIDE, CA 2057-6043  
 Phone: 760-631-5000  
 After Hours Phone:  
 760-631-5000  
 License Number: 20A8949  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM



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

### VISTA COMMUNITY CLINIC




Provider ID: 206341  
 4700 N RIVER RD


OCEANSIDE, CA 2057-6043  
 Phone: 760-631-5000  
 After Hours Phone:  
 760-631-5000  
 License Number: A149340  
 NPI: 1598122871


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


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

### VISTA COMMUNITY CLINIC




Provider ID: 206341  
 4700 N RIVER RD  
 OCEANSIDE, CA 2057-6043  
 Phone: 760-631-5000  
 After Hours Phone:  
 760-631-5000  
 License Number: NP95003571  
 NPI: 1598122871



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

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

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

### VISTA COMMUNITY CLINIC

Provider ID: 206341  
 4700 N RIVER RD  
 OCEANSIDE, CA 2057-6043  
 Phone: 760-631-5000  
 After Hours Phone:  
 760-631-5000  
 License Number: NP95009284  
 NPI: 1598122871

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

American Sign Language (ASL):  
 N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.vistacommunityclinic.org*


### **VISTA COMMUNITY CLINIC**

*Provider ID: 206341*

 4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

 *Phone: 760-631-5000*

*Fax: 760-414-3731*


 *After Hours Phone: 760-631-5000*

*License Number: A130883*

*NPI: 1598122871*

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

*Site English Spoken: Yes  
Cultural Competency: No*

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

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.vistacommunityclinic.org*

### **VISTA COMMUNITY CLINIC**

*Provider ID: 206341*

 4700 N RIVER RD  
OCEANSIDE, CA  
92057-6043

 *Phone: 760-631-5000*

 *After Hours Phone: 760-631-5000*

*License Number: NP95016368*

*NPI: 1598122871*

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

*Site English Spoken: Yes  
Cultural Competency: No*

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

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.vistacommunityclinic.org*

### **VISTA COMMUNITY CLINIC**

#### **PIER VIEW WAY**

*Provider ID: 402434*

 818 PIER VIEW WAY  
OCEANSIDE, CA  
92054-2803

 *Phone: 760-631-5000*

*Fax: 760-414-3892*


 *After Hours Phone: 760-631-5000*

*License Number: 80000510*

*NPI: 1598122871*

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

*Site English Spoken: Yes  
Cultural Competency: Yes*

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

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.vistacommunityclinic.org*

### **VISTA COMMUNITY CLINIC**


#### **PIER VIEW WAY**

*Provider ID: 402434*

 818 PIER VIEW WAY  
OCEANSIDE, CA  
92054-2803

 *Phone: 760-631-5000*

*Fax: 760-414-3892*

 *After Hours Phone: 760-631-5000*

*NPI: 1598122871*

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

*Site English Spoken: Yes*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Cultural Competency: No

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

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### PAUMA VALLEY

#### NEIGHBORHOOD

#### HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524

📞 Phone: 760-742-9919

🕒 After Hours Phone:  
760-742-9919

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes  
Cultural Competency: No

🕒 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 8:00AM-4:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

#### NEIGHBORHOOD

#### HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524

📞 Phone: 760-742-9919

🕒 After Hours Phone:  
760-742-9919

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes  
Cultural Competency: No

🕒 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

#### NEIGHBORHOOD

#### HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524

📞 Phone: 760-742-9919

Fax: 858-633-4696

🕒 After Hours Phone:  
760-742-9919

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes  
Cultural Competency: No

🕒 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

#### NEIGHBORHOOD



#### HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Phone: 760-742-9919  
Fax: 858-633-4696  
 After Hours Phone:  
760-742-9919  
License Number: 80000611  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### POWAY

#### NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD  
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

#### NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD  
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000


License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

#### NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD  
POWAY, CA 92064-4520

 Phone: 858-218-3000


 After Hours Phone:  
858-218-3000


License Number: PA23310

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### NEIGHBORHOOD

#### HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

13010 POWAY RD  
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:  
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### NEIGHBORHOOD

#### HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

13010 POWAY RD  
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:  
858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

## SAN DIEGO

#### KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

Fax: 619-662-4158

After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

#### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A112379

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None























Site English Spoken: yes  
Cultural Competency: No

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

American Sign Language (ASL):

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><b>SAN YSIDRO HEALTH CHC - OCEAN VIEW</b></p> <p><i>Provider ID: 227409</i></p> <p> 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A120576</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><b>SAN YSIDRO HEALTH CHC - OCEAN VIEW</b></p> <p><i>Provider ID: 227409</i></p> <p> 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A153414</i></p>	<p><b>SAN YSIDRO HEALTH CHC - OCEAN VIEW</b></p> <p><i>Provider ID: 227409</i></p> <p> 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A157505</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM</i></p>


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## B. 联邦合资质的健康诊所



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


**SAN YSIDRO HEALTH CHC - OCEAN VIEW**  
Provider ID: 227409  
 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A162332  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None




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





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






 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
**SAN YSIDRO HEALTH CHC - OCEAN VIEW**  
Provider ID: 227409  
 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A78373  
NPI: 1598122871

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

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

**SAN YSIDRO HEALTH CHC - OCEAN VIEW**  
Provider ID: 227409  
 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
 Phone: 619-662-4100  
 After Hours Phone:

619-662-4100  
License Number: C54198  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH CHC - OCEAN VIEW**  
Provider ID: 227409  
 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: C55180  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: DC33300

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-595-0258


 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-858-1003

 After Hours Phone:  
619-662-4100


License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD  
SAN DIEGO, CA 92154-1351

 Phone: 619-429-3733

 After Hours Phone:  
619-429-3733

License Number: A112781

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Language(s) Spoken:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.ibclinic.org](http://www.ibclinic.org)

### NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

📍 1016 OUTER RD  
SAN DIEGO, CA 92154-1351

☎ Phone: 619-429-3733

🕒 After Hours Phone:  
619-429-3733

License Number: A165398

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM

SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.ibclinic.org](http://www.ibclinic.org)

### NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

📍 1016 OUTER RD  
SAN DIEGO, CA 92154-1351

☎ Phone: 619-429-3733

🕒 After Hours Phone:  
619-429-3733

License Number: NP22031

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.ibclinic.org](http://www.ibclinic.org)

### NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

📍 1016 OUTER RD  
SAN DIEGO, CA 92154-1351

☎ Phone: 619-429-3733

Fax: 619-628-5550

🕒 After Hours Phone:  
619-429-3733

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.ibclinic.org](http://www.ibclinic.org)



### NESTOR COMMUNITY HEALTH CENTER




Provider ID: 214492

📍 1016 OUTER RD  
SAN DIEGO, CA 92154-1351

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




 Phone: 619-429-3733  
Fax: 619-628-5550  
 After Hours Phone:  
619-429-3733  
License Number: 550001474  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None



 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM


American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ibclinic.org](http://www.ibclinic.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone:  
619-515-2424  
License Number: NP95013978  
NPI: 1134155377  
Accepting New Patients: Yes

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

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



 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**


Provider ID: 416831  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone:  
619-515-2424

License Number: PA21042  
NPI: 1134155377

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

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

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

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



 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**


Provider ID: 416831  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
Fax: 619-683-7586

 After Hours Phone:  
619-515-2424  
NPI: 1134155377

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

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


American Sign Language (ASL):  
N

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-683-7586

 After Hours Phone:  
619-515-2424

License Number: 90000469

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: 20A14794


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

N

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

*License Number: 20A15068*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

*License Number: 20A15413*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


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

 *Website: www.fhcsd.org*

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*


*License Number: 20A20252*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*


*License Number: PA54661*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: PA61677

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: PT295463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: PT30272

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: PT33914

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: RN486421

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

Fax: 619-515-2510

After Hours Phone:  
619-515-2300

License Number: A178494

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:

619-515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No



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

American Sign Language (ASL):






N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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






### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*  
*License Number: A164859*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*


*American Sign Language (ASL): N*


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

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*  
*License Number: A178499*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*



*American Sign Language (ASL): N*

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



 *Website: www.fhcsd.org*

### **NORTH PARK FAMILY HEALTH CENTERS**






*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*

*License Number: A51318*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL): N*

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

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*  
*License Number: A68463*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424

License Number: C174771

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所



License Number: G78814  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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


American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **KING CHAVEZ HEALTH CENTER**




Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-428-4463  
 After Hours Phone:  
619-428-4463  
License Number: G71855  
NPI: 1598122871



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


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

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

### **KING CHAVEZ HEALTH CENTER**




Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A7435  
NPI: 1598122871



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


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

SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)



### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A8204  
NPI: 1598122871

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

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

### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
619-662-4100  
*License Number:* A101017  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

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

*American Sign Language (ASL):*  
N

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

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID:* 206362  
📍 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
☎ *Phone:* 619-515-2424  
☎ *After Hours Phone:*  
619-515-2424  
*License Number:* A113001  
*NPI:* 1134155377

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
☑ *Site English Spoken:* Yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 9:00AM-5:00PM

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

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO  
🌐 *Website:* [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID:* 206362  
📍 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
☎ *Phone:* 619-515-2424  
☎ *After Hours Phone:*  
619-515-2424

*License Number:* A114181  
*NPI:* 1134155377  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
☑ *Site English Spoken:* Yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO  
🌐 *Website:* [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID:* 206362  
📍 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
☎ *Phone:* 619-515-2424  
☎ *After Hours Phone:*  
619-515-2424  
*License Number:* A116680  
*NPI:* 1134155377

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
☑ *Site English Spoken:* Yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N  
♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO  
🌐 *Website:* [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A140646

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424


License Number: A147758

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


American Sign Language (ASL):

N






 Accessibility: CONTACT


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)




### **NORTH PARK FAMILY HEALTH CENTERS**



Provider ID: 206362  
 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone:  
619-515-2424  
License Number: A154298  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


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

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362  
 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone:  
619-515-2424  
License Number: A173486  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



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


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362  
 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone:  
619-515-2424




License Number: A180044  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



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

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100






License Number: A125329  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A134995  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM



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


SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100



License Number: A153223  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None




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



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

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### KING CHAVEZ HEALTH CENTER



Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100  
License Number: A165432  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A45942  
NPI: 1598122871


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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A79383

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A96919

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: DC27523

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **KING CHAVEZ HEALTH CENTER**

Provider ID: 451167

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP15657

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: NP8563

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A68463

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424

License Number: A72005

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: G78814


NPI: 1134155377

Accepting New Patients: Yes


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone: 619-515-2424

License Number: NP95002226


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone: 619-515-2424

License Number: NP95006792


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone: 619-515-2424

License Number: PA17220


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362


 3544 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 After Hours Phone:  
619-515-2424  
License Number: PA18746  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424  
Fax: 619-501-0627

 After Hours Phone:  
619-515-2424  
NPI: 1134155377

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


Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **SAN DIEGO AMERICAN INDIAN HEALTH CENTER**

Provider ID: 207382


 2630 1ST AVE  
SAN DIEGO, CA  
92103-6599

 Phone: 619-234-2158  
Fax: 619-234-0206


 After Hours Phone:  
619-234-2158  
NPI: 1598122871

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

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Korean, Spanish, Hindi  
Cultural Competency: No

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

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


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdaihc.org](http://www.sdaihc.org)

### **SAN DIEGO AMERICAN INDIAN HEALTH CENTER**

Provider ID: 207382

 2630 1ST AVE  
SAN DIEGO, CA  
92103-6599

 Phone: 619-234-2158  
Fax: 619-234-0206

 After Hours Phone:  
619-234-2158

License Number: 90000168  
NPI: 1598122871

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

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Korean, Spanish, Hindi  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdaihc.org](http://www.sdaihc.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:  
858-279-0925


License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

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

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:  
858-279-0925


License Number: A144372

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

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

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:  
858-279-0925


License Number: C174985

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

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

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:  
858-279-0925

License Number: DPM4434

NPI: 1598122871

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

Site English Spoken: Yes

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

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

After Hours Phone:  
858-279-0925

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

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

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

After Hours Phone:  
858-279-0925

License Number: G44807

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

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

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No



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

American Sign Language (ASL):






N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

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






### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*  
*License Number: A116680*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*


*American Sign Language (ASL):*  
N


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

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*  
*License Number: A118095*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
N

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

 *Website: www.fhcsd.org*

### **NORTH PARK FAMILY HEALTH CENTERS**


*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*

*License Number: A126181*  
*NPI: 1134155377*

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


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

*American Sign Language (ASL):*  
N

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



 *Website: www.fhcsd.org*

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 416831*  
 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*

*License Number: A132576*  
*NPI: 1134155377*

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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: NP95022452

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

License Number: PA13752

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: PA15227

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: PA17864

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


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


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: A104052


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: A109828


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: A115598


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: A136275


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM





























SA 8:00AM-5:30PM

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所






<p><b>N</b></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: N/A</i></p>	<p><b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b></p> <p><i>Provider ID: 403583</i></p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638</p> <p> <i>Phone: 619-233-8500</i></p> <p> <i>After Hours Phone: 619-233-8500</i></p> <p><i>License Number: A54702</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:30PM</i> <i>MO 8:00AM-5:30PM</i> <i>TU 8:00AM-5:30PM</i> <i>WE 8:00AM-5:30PM</i> <i>TH 8:00AM-5:30PM</i> <i>FR 8:00AM-5:30PM</i> <i>SA 8:00AM-5:30PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p><b>N</b></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: N/A</i></p>	<p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:30PM</i> <i>MO 8:00AM-5:30PM</i> <i>TU 8:00AM-5:30PM</i> <i>WE 8:00AM-5:30PM</i> <i>TH 8:00AM-5:30PM</i> <i>FR 8:00AM-5:30PM</i> <i>SA 8:00AM-5:30PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p><b>N</b></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: N/A</i></p>
<p><b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b></p> <p><i>Provider ID: 403583</i></p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638</p> <p> <i>Phone: 619-233-8500</i></p> <p> <i>After Hours Phone: 619-233-8500</i></p> <p><i>License Number: A42127</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:30PM</i> <i>MO 8:00AM-5:30PM</i> <i>TU 8:00AM-5:30PM</i> <i>WE 8:00AM-5:30PM</i> <i>TH 8:00AM-5:30PM</i> <i>FR 8:00AM-5:30PM</i> <i>SA 8:00AM-5:30PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p><b>N</b></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: N/A</i></p>	<p><b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b></p> <p><i>Provider ID: 403583</i></p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638</p> <p> <i>Phone: 619-233-8500</i></p> <p> <i>After Hours Phone: 619-233-8500</i></p> <p><i>License Number: A60801</i></p>	<p><b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b></p> <p><i>Provider ID: 403583</i></p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638</p> <p> <i>Phone: 619-233-8500</i></p> <p> <i>After Hours Phone: 619-233-8500</i></p> <p><i>License Number: A67762</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:30PM</i> <i>MO 8:00AM-5:30PM</i> <i>TU 8:00AM-5:30PM</i> <i>WE 8:00AM-5:30PM</i></p>


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所



TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583  
 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638  
 Phone: 619-233-8500  
 After Hours Phone: 619-233-8500  
License Number: A82123  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM




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


 Website: N/A  
**LOGAN HEIGHTS FAMILY HEALTH CENTER**  
Provider ID: 206360  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300  
License Number: NP11778  
NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

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

**LOGAN HEIGHTS FAMILY HEALTH CENTER**  
Provider ID: 206360  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300

 After Hours Phone: 619-515-2300  
License Number: NP17852  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

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

**LOGAN HEIGHTS FAMILY HEALTH CENTER**  
Provider ID: 206360  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300  
License Number: NP2286  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: NP95000602

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: NP95003689

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

<b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b> Provider ID: 403583 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 Phone: 619-233-8500 After Hours Phone: 619-233-8500 License Number: C53121 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: yes Cultural Competency: No Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: N/A	<b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b> NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: yes Cultural Competency: No Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: N/A	TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: N/A
<b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b> Provider ID: 403583 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 Phone: 619-233-8500 After Hours Phone: 619-233-8500 License Number: G72486 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: yes Cultural Competency: No Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: N/A	<b>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</b> Provider ID: 403583 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 Phone: 619-233-8500 After Hours Phone: 619-233-8500 License Number: G71080 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: yes Cultural Competency: No Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM	TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: NP10769

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:

619-233-8500

License Number: PA54617

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300


License Number: A93385

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300


License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: G81658

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: NM792

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: NP10906  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: 20A11535

NPI: 1134155377

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

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

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: 20A12653

NPI: 1134155377

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

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

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: 20A12732

NPI: 1134155377

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

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: 20A15743

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: 20A17072

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: 20A17478

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: A120043

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: A160489

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A163978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A164889

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A169752

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A177373

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


Accessibility: CONTACT

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## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A46161

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A61687

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A68124

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: A71671

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A77126

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

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## B. 联邦合资质的健康诊所


### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A142703

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A146111

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300


License Number: A147939

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A151631

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE  
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

619-515-2422  
 License Number: PA20888  
 NPI: 1134155377  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None

Site English Spoken: Yes  
 Cultural Competency: No  
 ⌚ Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL): Website: www.fhcsd.org  
 N

Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529  
 2325 COMMERCIAL ST STE 1400  
 SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422  
 After Hours Phone: 619-515-2422  
 License Number: PA53788  
 NPI: 1134155377  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No

⌚ Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL): Website: www.fhcsd.org  
 N

Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529  
 2325 COMMERCIAL ST STE 1400  
 SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422  
 Fax: 619-269-0053  
 After Hours Phone: 619-515-2422  
 NPI: 1134155377  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 ⌚ Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529  
 2325 COMMERCIAL ST STE 1400  
 SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422  
 Fax: 619-269-0053  
 After Hours Phone: 619-515-2422  
 License Number: 550003113  
 NPI: 1134155377

Accepting New Patients: Yes  
 Min/Max Age: 0\None

Site English Spoken: Yes  
 Cultural Competency: No  
 ⌚ Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM


American Sign Language (ASL):  
 N

Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A162946

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:  
619-515-2444

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No



 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):






N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*






### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 *Phone: 619-515-2444*  
 *After Hours Phone: 619-515-2444*  
*License Number: A108228*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*



*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*

### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**



*Provider ID: 517403*  
 316 25TH ST  
SAN DIEGO, CA 92102-3016  
 *Phone: 619-238-5551*  
 *After Hours Phone: 619-238-5551*  
*License Number: A97270*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: N/A*

### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**






*Provider ID: 517403*  
 316 25TH ST  
SAN DIEGO, CA 92102-3016  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: A156607*

*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: N/A*






### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**


*Provider ID: 517403*  
 316 25TH ST  
SAN DIEGO, CA 92102-3016  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: NP20849*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A



**SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**  
Provider ID: 517403  
 316 25TH ST  
SAN DIEGO, CA 92102-3016  
 Phone: 619-662-4100  
Fax: 619-238-3807  
 After Hours Phone: 619-662-4100  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM




American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA



 Website: N/A  
**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED**  
Provider ID: 517998  
 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED**  
Provider ID: 517998  
 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403  
 Phone: 619-662-4100

 After Hours Phone: 619-662-4100  
License Number: 20A7502  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED**  
Provider ID: 517998  
 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: 550003882  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所



 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100

License Number: NP95005999  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE  
1400  
SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422

 After Hours Phone:  
619-515-2422

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.org

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE  
1400  
SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:  
619-515-2422

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE  
1400  
SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

📞 *After Hours Phone:*  
619-515-2422

*License Number:* NP95011254

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗨️ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website:* www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

*Provider ID:* 417937

📍 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

📞 *Phone:* 619-515-2545

📞 *After Hours Phone:*  
619-515-2545

*License Number:* PA21385

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗨️ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website:* www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

*Provider ID:* 417937

📍 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

📞 *Phone:* 619-515-2545

📞 *After Hours Phone:*  
619-515-2545

*License Number:* PA23231

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗨️ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website:* www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

*Provider ID:* 417937

📍 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

📞 *Phone:* 619-515-2545

📞 *After Hours Phone:*  
619-515-2545

*License Number:* PT12930

*NPI:* 1134155377

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

🗨️ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website:* www.fhcsd.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: PT25155

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: PT28061

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: PT292351

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: PT292613

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM


American Sign Language (ASL):

N






 Accessibility: CONTACT


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **FAMILY HLTH CTR SD HILLCREST**


Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: PT293536  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER




Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



**FAMILY HLTH CTR SD  
HILLCREST**  
Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: PT295173  
NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



**FAMILY HLTH CTR SD  
HILLCREST**  
Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545

License Number: PT296559  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SD  
HILLCREST**  
Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: PT40975  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD


#### HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645


 After Hours Phone:  
619-515-2545

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD


#### HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:  
619-515-2545

License Number: 550003099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD


#### HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:  
619-515-2545


License Number: A95356

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SAN

#### DIEGO-OAK PARK

Provider ID: 418142


 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 After Hours Phone:  
619-515-2454  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142


 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454  
Fax: 619-794-2696

 After Hours Phone:  
619-515-2454


License Number: 550003556  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429


 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454

License Number: 20A12796


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429


 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454


License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454


License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987

 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

 Phone: 619-515-2426


 After Hours Phone:  
619-515-2426


License Number: PA59481

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HEALTH CTR OF SDELM ST**

Provider ID: 419167

 140 ELM ST  
SAN DIEGO, CA 92101-2602

 Phone: 619-515-2520

Fax: 619-231-0431


 After Hours Phone:  
619-515-2520

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

 140 ELM ST  
SAN DIEGO, CA 92101-2602

 Phone: 619-515-2520

Fax: 619-231-0431

 After Hours Phone:  
619-515-2520


License Number: 550002061

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A115598

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

License Number: A140912

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A161373

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A178499


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A72005


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: C174538


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: C174771


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

License Number: MT2061555

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: NP95005321

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: NP95009292


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: NP95021154


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: PA20378


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: PA58081


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: PA60864

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

Fax: 619-263-2499

 After Hours Phone:


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

619-515-2560  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None




 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363  
 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
Fax: 619-263-2499  
 After Hours Phone:  
619-515-2560  
License Number: A100391  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM




MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DOWNTOWN FAMILY CTR AT CONNECTIONS


Provider ID: 417782  
 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368  
 Phone: 619-515-2430  
 After Hours Phone:  
619-515-2430

License Number: 20A7147  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None




 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782  
 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368  
 Phone: 619-515-2430  
 After Hours Phone:  
619-515-2430  
License Number: PA58826  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **DOWNTOWN FAMILY CTR AT CONNECTIONS**

Provider ID: 417782

1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368

Phone: 619-515-2430

Fax: 619-578-2410

After Hours Phone:  
619-515-2430

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DOWNTOWN FAMILY CTR AT CONNECTIONS**

Provider ID: 417782

1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368

Phone: 619-515-2430

Fax: 619-578-2410

After Hours Phone:

619-515-2430

License Number: 550002251

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:

619-515-2426

License Number: 20A17577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:

619-515-2426

License Number: 20A19345

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: A145023

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: G149974

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: NP17838

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)






### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:  
619-515-2426  
License Number: NP95004443  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:  
619-515-2426  
License Number: PA21385  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM






American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:

619-515-2426  
License Number: PA58098  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:  
619-515-2426  
License Number: PA58905  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700

License Number: NP16433

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700

License Number: NP23847

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-279-0377

 After Hours Phone:  
858-279-0925

License Number: A93812

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


### LINDA VISTA HEALTH CARE CTR


Provider ID: 206046

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所



 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342


 Phone: 858-279-0925  
Fax: 858-279-0377

 After Hours Phone:  
858-279-0925

License Number: G70886  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046



 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342


 Phone: 858-279-0925  
Fax: 858-633-4680

 After Hours Phone:

858-279-0925  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046


 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

 Phone: 858-810-8700  
 After Hours Phone:

858-810-8700  
License Number: 20A12402  
NPI: 1598122871


Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes


 Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### MID-CITY COMMUNITY CLINIC


Provider ID: 233597


 4290 POLK AVE  
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250  
 After Hours Phone:

619-563-0250  
License Number: 20A7662  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: 619-563-0250 After Hours Phone: 619-563-0250 License Number: A163512 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>	Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>
<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: 619-563-0250 After Hours Phone: 619-563-0250 License Number: A112176 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: 619-563-0250 After Hours Phone: 619-563-0250 License Number: DPM4434 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: 619-563-0250 After Hours Phone: 619-563-0250 License Number: DPM4434 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM
<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: 619-563-0250 After Hours Phone: 619-563-0250 License Number: A175116 NPI: 1598122871	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: 619-563-0250 After Hours Phone: 619-563-0250 License Number: A175116 NPI: 1598122871	

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## B. 联邦合资质的健康诊所

<p>SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: A112176 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p>License Number: A152267 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>
<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597  4290 POLK AVE SAN DIEGO, CA 92105-1524  Phone: 619-563-0250  After Hours Phone: 619-563-0250 License Number: G60630 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: A163512 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM</p>	<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: A163512 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p>TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p>150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: A72833 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>License Number: A94449 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>
<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: A61238 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: NP95019446 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p><b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690  Phone: 619-280-2058  After Hours Phone: 619-280-2058 License Number: NP95019446 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p> Site English Spoken: Yes Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>FR 8:30AM-5:30PM SA 8:30AM-5:30PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p>	<p>SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>
<p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p>	<p> Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p> <p><b>SAN DIEGO FAMILY CARE</b> Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: A119010 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p><b>SAN DIEGO FAMILY CARE</b> Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: A137415 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>
<p><b>SAN DIEGO FAMILY CARE</b> Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: 20A12402 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p> Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No</p> <p> Hours: SU 8:30AM-5:30PM MO 8:30AM-5:30PM TU 8:30AM-5:30PM WE 8:30AM-5:30PM TH 8:30AM-5:30PM FR 8:30AM-5:30PM SA 8:30AM-5:30PM</p>	<p> Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No</p> <p> Hours: SU 8:30AM-5:30PM MO 8:30AM-5:30PM TU 8:30AM-5:30PM WE 8:30AM-5:30PM TH 8:30AM-5:30PM FR 8:30AM-5:30PM SA 8:30AM-5:30PM</p>
<p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p> <p> Hours: SU 8:30AM-5:30PM MO 8:30AM-5:30PM TU 8:30AM-5:30PM WE 8:30AM-5:30PM TH 8:30AM-5:30PM</p>	<p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p> <p><b>SAN DIEGO FAMILY CARE</b> Provider ID: 482070</p> <p> 7011 LINDA VISTA RD</p>	<p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></p> <p><b>SAN DIEGO FAMILY CARE</b> Provider ID: 482070</p> <p> 7011 LINDA VISTA RD</p>


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 SAN DIEGO, CA 92111-6307  
 Phone: 858-810-8700  
 After Hours Phone:  
858-810-8700  
License Number: A61238  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070


 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307  
 Phone: 858-810-8700  
 After Hours Phone:  
858-810-8700  
License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Min/Max Age: 0\None

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**


Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307  
 Phone: 858-810-8700  
 After Hours Phone:  
858-810-8700  
License Number: A92173

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese


Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307  
 Phone: 858-810-8700  
 After Hours Phone:  
858-810-8700  
License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese





Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

- N**  
 **Accessibility:** CONTACT PROVIDER  
**Medical Group/IPA:** IHP OF SOUTHERN CALIFORNIA  
 **Website:** [www.sdfamilycare.org](http://www.sdfamilycare.org)
- SAN DIEGO FAMILY CARE**  
**Provider ID:** 482070  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307  
 **Phone:** 858-810-8700  
 **After Hours Phone:** 858-810-8700  
**License Number:** C174985  
**NPI:** 1598122871  
**Accepting New Patients:** Yes  
**Min/Max Age:** 0\None  
 **Site English Spoken:** yes  
 **Site Languages(s) Spoken:** Lithuanian, Vietnamese, Spanish, Chinese  
**Cultural Competency:** No  
 **Hours:** SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
**American Sign Language (ASL):** N
- SAN DIEGO FAMILY CARE**  
**Provider ID:** 482070  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307  
 **Phone:** 858-810-8700  
 **After Hours Phone:** 858-810-8700  
**License Number:** G41532  
**NPI:** 1598122871  
**Accepting New Patients:** Yes  
**Min/Max Age:** 0\None  
 **Site English Spoken:** yes  
 **Site Languages(s) Spoken:** Lithuanian, Vietnamese, Spanish, Chinese  
**Cultural Competency:** No  
 **Hours:** SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
**American Sign Language (ASL):** N
- SAN DIEGO FAMILY CARE**  
**Provider ID:** 482070  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307  
 **Phone:** 858-810-8700  
 **After Hours Phone:** 858-810-8700  
**License Number:** G70886  
**NPI:** 1598122871  
**Accepting New Patients:** Yes  
**Min/Max Age:** 0\None  
 **Site English Spoken:** yes  
 **Site Languages(s) Spoken:** Lithuanian, Vietnamese, Spanish, Chinese  
**Cultural Competency:** No  
 **Hours:** SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
**American Sign Language (ASL):** N
- FAMILY HLTH CTR SAN DIEGO-BEACH AREA**  
**Provider ID:** 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 **Phone:** 619-515-2444  
 **After Hours Phone:** 619-515-2444  
**License Number:** A113001  
**NPI:** 1134155377  
**Accepting New Patients:** Yes  
**Min/Max Age:** 0\None
- N**  
 **Accessibility:** CONTACT PROVIDER  
**Medical Group/IPA:** IHP OF SOUTHERN CALIFORNIA  
 **Website:** [www.sdfamilycare.org](http://www.sdfamilycare.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*


 *After Hours Phone: 619-515-2444*

*License Number: A114181*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone: 619-515-2444*

*License Number: A116680*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone: 619-515-2444*

*License Number: A118095*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 8:30AM-5:30PM*  
*MO 8:30AM-5:30PM*  
*TU 8:30AM-5:30PM*  
*WE 8:30AM-5:30PM*  
*TH 8:30AM-5:30PM*  
*FR 8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 *Phone: 619-515-2444*

 *After Hours Phone:*



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




619-515-2444  
License Number: A148014  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None



 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**




Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: A154298  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM



MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org




### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**



Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: A154399  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: A163464  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **OPERATION SAMAHAN - MIRA MESA**

Provider ID: 432308

 9855 ERMA RD STE 105  
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

Fax: 858-536-8034

 After Hours Phone:  
844-200-2426


License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM


FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA:  
OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### **OPERATION SAMAHAN - MIRA MESA**

Provider ID: 432308

 9855 ERMA RD STE 105  
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

 After Hours Phone:  
844-200-2426

License Number: NP95010585

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog  
Cultural Competency: No
























 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: OPERATION SAMAHAN  <i>Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></i></p>	<p><b>OPERATION SAMAHAN - MIRA MESA</b> Provider ID: 432308  9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007  <i>Phone: 844-200-2426</i>  <i>After Hours Phone: 844-200-2426</i> License Number: NP22974 NPI: 1801907449 <i>Accepting New Patients: Yes</i> Min/Max Age: 0\None  <i>Site English Spoken: yes</i> Cultural Competency: No  <i>Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: OPERATION SAMAHAN  <i>Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></i></p>	<p>844-200-2426 NPI: 1801907449 <i>Accepting New Patients: Yes</i> Min/Max Age: 0\None  <i>Site English Spoken: yes</i> Cultural Competency: No  <i>Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: OPERATION SAMAHAN  <i>Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: OPERATION SAMAHAN  <i>Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></i></p>	<p><b>OPERATION SAMAHAN - MIRA MESA</b> Provider ID: 432308  9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007  <i>Phone: 844-200-2426</i> <i>Fax: 858-536-8034</i>  <i>After Hours Phone:</i></p>	<p><b>LA MAESTRA FAMILY CLINIC INC</b> Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  <i>Phone: 619-564-8765</i>  <i>After Hours Phone: 619-564-8765</i> License Number: NP95009891 NPI: 1609849074 <i>Accepting New Patients: Yes</i> Min/Max Age: 0\None  <i>Site English Spoken: Yes</i> Cultural Competency: No  <i>Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM</i></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

 Phone: 619-798-3947

 After Hours Phone:  
619-798-3947

License Number: DC32800


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)


### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426

 After Hours Phone:  
844-200-2426

License Number: A161105

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM


SA 8:00AM-4:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426

 After Hours Phone:  
844-200-2426

License Number: C54941

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM


SA 8:00AM-4:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)































### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE  
235



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。






## B. 联邦合资质的健康诊所


<p> SAN DIEGO, CA 92126-2375  Phone: 844-200-2426  After Hours Phone: 844-200-2426 License Number: DC15775 NPI: 1801907449 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: yes  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No  Hours: SU 8:00AM-4:30PM MO 8:00AM-4:30PM TU 8:00AM-4:30PM WE 8:00AM-4:30PM TH 8:00AM-4:30PM FR 8:00AM-4:30PM SA 8:00AM-4:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN  Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: yes  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No  Hours: SU 8:00AM-4:30PM MO 8:00AM-4:30PM TU 8:00AM-4:30PM WE 8:00AM-4:30PM TH 8:00AM-4:30PM FR 8:00AM-4:30PM SA 8:00AM-4:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN  Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></p>	<p> Hours: SU 8:00AM-4:30PM MO 8:00AM-4:30PM TU 8:00AM-4:30PM WE 8:00AM-4:30PM TH 8:00AM-4:30PM FR 8:00AM-4:30PM SA 8:00AM-4:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN  Website: <a href="http://www.operationsamahan.org">www.operationsamahan.org</a></p>
<p><b>OPERATION SAMAHAN - MIRA MESA</b> Provider ID: 417101  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375  Phone: 844-200-2426  After Hours Phone: 844-200-2426 License Number: NP95003211 NPI: 1801907449</p>	<p><b>OPERATION SAMAHAN - MIRA MESA</b> Provider ID: 417101  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375  Phone: 844-200-2426 Fax: 858-578-4417  After Hours Phone: 844-200-2426 NPI: 1801907449 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: yes  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No</p>	<p><b>OPERATION SAMAHAN - MIRA MESA</b> Provider ID: 417101  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375  Phone: 844-200-2426 Fax: 858-578-4417  After Hours Phone: 844-200-2426 License Number: 80000146 NPI: 1801907449 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: yes  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No  Hours: SU 8:00AM-4:30PM MO 8:00AM-4:30PM TU 8:00AM-4:30PM WE 8:00AM-4:30PM TH 8:00AM-4:30PM</p>


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所



FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**  
Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: A68463  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN





DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**  
Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444





License Number: A72005  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**  
Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: A76785  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**  
Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: C174771  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

*Cultural Competency: No*


 *Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 *3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104*

 *Phone: 619-515-2444*

 *After Hours Phone:  
619-515-2444*

*License Number: C53623*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


 *Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 *3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104*

 *Phone: 619-515-2444*


 *After Hours Phone:  
619-515-2444*

*License Number: DC20729*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 *3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104*

 *Phone: 619-515-2444*

 *After Hours Phone:  
619-515-2444*

*License Number: DPM4819*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

*Provider ID: 402851*

 *3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104*

 *Phone: 619-515-2444*

 *After Hours Phone:  
619-515-2444*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


License Number: G78814  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):




N  
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**



Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444

License Number: NM1662


NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**



Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **LA MAESTRA FAMILY CLINIC INC**



Provider ID: 185268

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608  
 Phone: 619-255-9155  
 After Hours Phone: 619-255-9155

License Number: NP95013257

NPI: 1609849074


Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:  
619-255-9155

License Number: PA13694

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:  
619-255-9155

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

Fax: 619-284-4731

After Hours Phone:  
619-255-9155

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

Fax: 619-749-5480

After Hours Phone:  
619-255-9155

License Number: A81682

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*


 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185268*

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

 *Phone: 619-280-7072*


 *After Hours Phone: 619-280-7072*


*License Number: 20A14222*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA*


*MAESTRA FAMILY CLINIC*


 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185268*

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

 *Phone: 619-255-9154*

 *After Hours Phone: 619-255-9154*

*License Number: A123929*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA*


*MAESTRA FAMILY CLINIC*

 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185268*

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

 *Phone: 619-255-9154*

 *After Hours Phone: 619-255-9154*


*License Number: A163693*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA*


*MAESTRA FAMILY CLINIC*

 *Website: www.lamaestra.org*

### **LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185268*

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

 *Phone: 619-255-9155*


 *After Hours Phone: 619-255-9155*


*License Number: A111170*

*NPI: 1609849074*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*









 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

<p>TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC  Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>	<p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC  Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>	<p><b>LA MAESTRA FAMILY CLINIC INC</b> Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155 License Number: A82639 NPI: 1609849074 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>License Number: C55979 NPI: 1609849074 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>
<p><b>LA MAESTRA FAMILY CLINIC INC</b> Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155 License Number: A75533 NPI: 1609849074 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC  Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC  Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p><b>LA MAESTRA FAMILY CLINIC INC</b> Provider ID: 185268</p>	<p><b>LA MAESTRA FAMILY CLINIC INC</b> Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155  After Hours Phone: 619-255-9155 License Number: DC28966 NPI: 1609849074 Accepting New Patients: Yes</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:  
619-255-9155

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:  
619-255-9155

License Number: G87837

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

g

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA  
92129-2889

Phone: 844-200-2426

After Hours Phone:  
844-200-2426

License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN


Website: [www.operationsamahan.org](http://www.operationsamahan.org)


### OPERATION SAMAHAN RANCHO PENASQUITOS


Provider ID: 418535

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

 After Hours Phone: 844-200-2426

License Number: DC29074

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM


TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

 After Hours Phone: 844-200-2426

License Number: NP22974

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

 After Hours Phone: 844-200-2426

License Number: NP95003211

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426

 After Hours Phone: 844-200-2426

License Number: PA19664

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

☎ Phone: 844-200-2426

Fax: 858-695-9074

🕒 After Hours Phone: 844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM

FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

☎ Phone: 844-200-2426

Fax: 858-695-9074

🕒 After Hours Phone: 844-200-2426

License Number: 550002478

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:  
OPERATION SAMAHAN

🌐 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

☎ Phone: 844-200-2426

Fax: 858-695-9074

🕒 After Hours Phone: 844-200-2426

License Number: 550003857

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N


♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:  
OPERATION SAMAHAN

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


 Website: [www.operationsamahahan.org](http://www.operationsamahahan.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**


Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444  
Fax: 858-488-1394

 After Hours Phone:  
619-515-2444  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444  
Fax: 858-488-1394

 After Hours Phone:  
619-515-2444

License Number: 80000115  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363


 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-263-2499  
 After Hours Phone:  
619-263-2499

License Number: 20A7241  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**


Provider ID: 206363


 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420  
 After Hours Phone:  
619-515-2420

License Number: 20A11535  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:  
619-515-2420

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435

 After Hours Phone:  
619-515-2435

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435

 After Hours Phone:

619-515-2435


License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435

 After Hours Phone:  
619-515-2435


License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No



 Hours: SU 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC




Provider ID: 356145  
 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941  
 Phone: 619-515-2435  
 After Hours Phone: 619-515-2435  
License Number: PA16245  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC



Provider ID: 356145  
 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941  
 Phone: 619-515-2435  
 After Hours Phone: 619-515-2435  
License Number: PA53788  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None




 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC


Provider ID: 356145  
 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941  
 Phone: 619-515-2435  
Fax: 619-515-2435  
 After Hours Phone: 619-515-2435  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363  
 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2420  
 After Hours Phone: 619-515-2420

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: A154298  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org



### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2420  
 After Hours Phone:  
619-515-2420

License Number: A68463  
NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
 After Hours Phone:  
619-515-2560

License Number: 20A13745  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org



### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545


License Number: A177462  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: A70175

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: A80153

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: A80461

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: C52451

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: DC31024

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO CITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:  
619-515-2525


License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone: 619-515-2525

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone: 619-515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone: 619-515-2525

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone: 619-515-2525

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: NP95010814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN**

#### **DIEGOCITY COLLEGE**

Provider ID: 417429

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

After Hours Phone:

619-515-2525

License Number: PA22762

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN**

#### **DIEGOCITY COLLEGE**

Provider ID: 417429

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

Fax: 619-501-5814

After Hours Phone:

619-515-2525

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN**

#### **DIEGOCITY COLLEGE**

Provider ID: 417429

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

Fax: 619-501-5814

After Hours Phone:

619-515-2525

License Number: 550002865

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2400

 After Hours Phone:  
619-515-2400


License Number: 20A17836

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A11612

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: 20A12504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A17657

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A17702

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A17926

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT


### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A19399

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: A100333

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: A109633  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org



### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: A119631  
NPI: 1134155377



Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: A136616  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org



### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545



License Number: A140324  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: A154708

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: A169207

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: A171135

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: 20A14919


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: 20A15471


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A108228


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A113448


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: G16236

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: G80316  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545


License Number: NP18098  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545

License Number: NP7374  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT

PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545

License Number: NP95001899  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:  
619-515-2545

License Number: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:  
619-515-2545

License Number: NP95005293

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

## SAN MARCOS

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA22667

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA51867

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:

760-736-6767

License Number: NP95002545

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: NP95003903

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

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## B. 联邦合资质的健康诊所

Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
🌐 Website: www.ihpsocal.org

### TRUECARE

Provider ID: 625875  
📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
☎ Phone: 760-736-6767  
📞 After Hours Phone:  
760-736-6767

License Number: PA17101  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM

SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
🌐 Website: www.ihpsocal.org

### TRUECARE

Provider ID: 625875  
📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
☎ Phone: 760-736-6767  
📞 After Hours Phone:  
760-736-6767

License Number: NP20893  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

### TRUECARE

Provider ID: 625875  
📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

☎ Phone: 760-736-6767  
📞 After Hours Phone:  
760-736-6767

License Number: NP21368  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
🌐 Website: www.ihpsocal.org

### TRUECARE

Provider ID: 625875  
📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
☎ Phone: 760-736-6767

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
760-736-6767

*License Number:* NP95001653  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☐ *Site English Spoken:* Yes  
☐ *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 625875

📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

☎ *Phone:* 760-736-6767

☎ *After Hours Phone:*  
760-736-6767

*License Number:* G71182

*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 625875

📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

☎ *Phone:* 760-736-6767

☎ *After Hours Phone:*  
760-736-6767

*License Number:* NM235844

*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM

*FR 8:00AM-5:00PM*

*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 625875

📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

☎ *Phone:* 760-736-6767

☎ *After Hours Phone:*  
760-736-6767

*License Number:* NM235997

*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*

N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: NP18874

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: C54157

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: DC29074

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes































Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM































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## B. 联邦合资质的健康诊所

FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Website: www.ihpsocal.org After Hours Phone: 760-736-6767 License Number: A71311 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A60958 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A63903 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767	<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: 20A15159 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 <i>Site Languages(s) Spoken:</i> Spanish	FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>
<i>Cultural Competency:</i> No	<i>American Sign Language (ASL):</i>	<b>TRUECARE</b>
 <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	N	<i>Provider ID:</i> 625875
<i>American Sign Language (ASL):</i>	 <i>Accessibility:</i> CONTACT PROVIDER	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973
N	<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA	 <i>Phone:</i> 760-736-6767
 <i>Accessibility:</i> CONTACT PROVIDER	 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>	 <i>After Hours Phone:</i> 760-736-6767
<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA	<b>TRUECARE</b>	<i>License Number:</i> A48980
 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>	<i>Provider ID:</i> 625875	<i>NPI:</i> 1598122871
<b>TRUECARE</b>	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	<i>Accepting New Patients:</i> Yes
<i>Provider ID:</i> 625875	 <i>Phone:</i> 760-736-6767	<i>Min/Max Age:</i> 0\None
 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	 <i>After Hours Phone:</i> 760-736-6767	 <i>Site English Spoken:</i> Yes
 <i>Phone:</i> 760-736-6767	<i>License Number:</i> A116562	 <i>Site Languages(s) Spoken:</i> Spanish
 <i>After Hours Phone:</i> 760-736-6767	<i>NPI:</i> 1598122871	<i>Cultural Competency:</i> No
<i>License Number:</i> 20A17306	<i>Accepting New Patients:</i> Yes	 <i>Hours:</i> SU 8:00AM-5:00PM
<i>NPI:</i> 1598122871	<i>Min/Max Age:</i> 0\None	MO 8:00AM-5:00PM
<i>Accepting New Patients:</i> Yes	 <i>Site English Spoken:</i> Yes	TU 8:00AM-5:00PM
<i>Min/Max Age:</i> 0\None	 <i>Site Languages(s) Spoken:</i> Spanish	WE 8:00AM-5:00PM
 <i>Site English Spoken:</i> Yes	<i>Cultural Competency:</i> No	TH 8:00AM-5:00PM
 <i>Site Languages(s) Spoken:</i> Spanish	 <i>Hours:</i> SU 8:00AM-5:00PM	FR 8:00AM-5:00PM
<i>Cultural Competency:</i> No	MO 8:00AM-5:00PM	SA 8:00AM-5:00PM
 <i>Hours:</i> SU 8:00AM-5:00PM	TU 8:00AM-5:00PM	<i>American Sign Language (ASL):</i>
MO 8:00AM-5:00PM	WE 8:00AM-5:00PM	N
TU 8:00AM-5:00PM	TH 8:00AM-5:00PM	 <i>Accessibility:</i> CONTACT PROVIDER
WE 8:00AM-5:00PM	FR 8:00AM-5:00PM	<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA
TH 8:00AM-5:00PM	SA 8:00AM-5:00PM	 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>
	<i>American Sign Language (ASL):</i>	<b>TRUECARE</b>
	N	<i>Provider ID:</i> 625875
	 <i>Accessibility:</i> CONTACT PROVIDER	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078-2450
	<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA	 <i>Phone:</i> 760-736-6767

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Fax: 760-736-6744

 After Hours Phone:  
760-736-6767

License Number: 1598122871

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:  
760-736-6767

License Number: NP18788

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:  
760-736-6767

License Number: PA17718

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106  
SAN MARCOS, CA  
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:  
760-736-6767


License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106  
SAN MARCOS, CA  
92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:  
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

Phone: 760-736-6767

Fax: 760-736-8740

After Hours Phone:

760-736-6767

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

Phone: 760-736-6767

Fax: 760-736-8740

After Hours Phone:  
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes


























Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

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## B. 联邦合资质的健康诊所

- N**  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- TRUECARE**  
*Provider ID: 625875*  
 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450  
 *Phone: 760-520-8200*  
*Fax: 360-462-2749*  
 *After Hours Phone: 760-520-8200*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*  
*American Sign Language (ASL): N*
-  *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- TRUECARE**  
*Provider ID: 625875*
-  1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450  
 *Phone: 760-520-8200*  
*Fax: 360-462-2749*  
 *After Hours Phone: 760-520-8200*  
*License Number: 80000167*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*  
*American Sign Language (ASL): N*
-  *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- SAN YSIDRO**  
**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
*Fax: 619-205-1948*
-  *After Hours Phone: 619-662-4100*  
*License Number: A49307*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL): N*
-  *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
*Fax: 619-205-1948*  
 *After Hours Phone: 619-662-4100*  
*License Number: A63844*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


- Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
*Fax: 619-205-1948*  
 *After Hours Phone: 619-662-4100*  
*License Number: A72721*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
*Fax: 619-205-1948*  
 *After Hours Phone: 619-662-4100*  
*License Number: A82187*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*
- SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
*Fax: 619-205-1948*  
 *After Hours Phone: 619-662-4100*  
*License Number: G20087*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*


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## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100  
Fax: 619-205-1948

 After Hours Phone:  
619-662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100  
Fax: 619-205-6305

 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100


License Number: A175006

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A178949

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## B. 联邦合资质的健康诊所


FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA 92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A47906  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):






N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF




SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA 92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A74960  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A94813  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA 92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: C149818  
NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: C158543

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: C160626

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: G52183

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


Website: [www.ihpsocal.org](http://www.ihpsocal.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A14222

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A14949

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 20A8516

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No






 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**



Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A111118  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA



 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**


Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A112627

NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM



American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411  
 4050 BEYER BLVD

SAN YSIDRO, CA  
92173-2007




 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100

License Number: A113914  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A138938  
NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A169577

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-205-6341

After Hours Phone:  
619-205-6341

License Number: A64487

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Language(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A130348

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007  
Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A131021

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A131952

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A132982

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A138568*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM*

*FR 8:00AM-5:30PM*

*SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A145008*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A145480*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007  
Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A158364

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A101017

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A101827

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A104660*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM*

*FR 8:00AM-5:30PM*

*SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A106103*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A113482*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

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## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A114008

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007  
Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A127188

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

*Provider ID: 227469*

 *3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: PA58672*


*NPI: 1598122871*

*Accepting New Patients: Yes*


*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

*Provider ID: 227469*

 *3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: PT302385*


*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

*Provider ID: 227469*

 *3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322*

 *Phone: 619-662-4100  
Fax: 619-600-4870*

 *After Hours Phone:  
619-662-4100*


*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

*Provider ID: 206292*

 *4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007*

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A49267*

*NPI: 1598122871*

*Accepting New Patients: Yes*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


*SOUTHERN CALIFORNIA*


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A66885

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF


*SOUTHERN CALIFORNIA*

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF

*SOUTHERN CALIFORNIA*


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100


License Number: A72235

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes


 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF


*SOUTHERN CALIFORNIA*


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A77936

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A80832

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A159673

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A169694

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A170738

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A173435

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A175006

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A177337

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A180886

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A40480

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-428-4463

 After Hours Phone:  
619-428-4463

License Number: 20A8245

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-428-4463

 After Hours Phone:  
619-428-4463

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A11153

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 20A17643

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 20A7502

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 20A8081

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 20A9907

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A84160

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A93785

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A99433

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: C42207

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: DC33693

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G59670

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G80107

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A153975

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p>☎ <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> A164201 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None</p>	<p>MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM <i>American Sign Language (ASL):</i> N</p>	<p><i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA 🌐 <i>Website:</i> www.ihpsocal.org</p>
<p>☑ <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No 🕒 <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>♿ <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA 🌐 <i>Website:</i> www.ihpsocal.org</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> <i>Provider ID:</i> 227469 📍 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 ☎ <i>Phone:</i> 619-662-4100 ☎ <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> A40473 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None</p>
<p><i>American Sign Language (ASL):</i> N ♿ <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA 🌐 <i>Website:</i> www.ihpsocal.org</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> <i>Provider ID:</i> 227469 📍 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 ☎ <i>Phone:</i> 619-662-4100 ☎ <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> A32571 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None</p>	<p>☑ <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No 🕒 <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM <i>American Sign Language (ASL):</i> N</p>
<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> <i>Provider ID:</i> 227469 📍 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 ☎ <i>Phone:</i> 619-662-4100 ☎ <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> A167529 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None</p>	<p>☑ <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No 🕒 <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM <i>American Sign Language (ASL):</i> N</p>	<p>♿ <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA 🌐 <i>Website:</i> www.ihpsocal.org</p>
<p>☑ <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No 🕒 <i>Hours:</i> SU 8:00AM-5:00PM</p>	<p>♿ <i>Accessibility:</i> CONTACT PROVIDER</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> <i>Provider ID:</i> 227469 📍 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A51843

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C42207


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G66745


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**







Provider ID: 227469

 3364 BEYER BLVD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。






## B. 联邦合资质的健康诊所

<p> SAN YSIDRO, CA 92173-1322  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: NP12112 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><i>Cultural Competency: No</i>  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p> Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> Provider ID: 227469  3364 BEYER BLVD SAN YSIDRO, CA 92173-1322  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: NP95003721 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> Provider ID: 227469  3364 BEYER BLVD SAN YSIDRO, CA 92173-1322  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: NP95003671 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> Provider ID: 227469  3364 BEYER BLVD SAN YSIDRO, CA 92173-1322  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: NP95003721 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> Provider ID: 227469  3364 BEYER BLVD SAN YSIDRO, CA 92173-1322  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: NP95001960 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> Provider ID: 227469</p>	<p><b>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</b> Provider ID: 227469</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP95004315  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None




 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM



American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP95017732  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None




 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469



 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP95019995  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)



### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-6341  
 After Hours Phone:  
619-662-4100


License Number: A55469  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
 Site Language(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


### SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:  
619-662-4100


License Number: A78373

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### SAN YSIDRO HLTH SAN DIEGO

#### PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4867

 After Hours Phone:  
619-600-4867

License Number: PA22855

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HLTH SAN DIEGO

#### PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4870

 After Hours Phone:  
619-600-4870

License Number: NP95018617


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HLTH SAN DIEGO

#### PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A113624


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM

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## B. 联邦合资质的健康诊所

TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N


 **Accessibility: CONTACT PROVIDER**


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G81461

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):


N


 **Accessibility: CONTACT**

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP12112

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 **Accessibility: CONTACT PROVIDER**


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95003355

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM


TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**






Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所






92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: PA17162  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: PA20490  
NPI: 1598122871






Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-6305  
 After Hours Phone:  
619-662-4100  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-6341  
 After Hours Phone:  
619-662-4100  
License Number: DPM2930  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

American Sign Language (ASL): Medical Group/IPA: IHP OF  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100  
Fax: 619-205-6341

 After Hours Phone:  
619-662-4100

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM


American Sign Language (ASL): Medical Group/IPA: IHP OF  
N


 Accessibility: CONTACT  
PROVIDER

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100  
Fax: 619-205-6341

 After Hours Phone:  
619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


## SPRING VALLE

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: 20A11535


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361


 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: 20A14919  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: www.fhcsd.org  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**




Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: 20A15459  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



American Sign Language (ASL):  Website: www.fhcsd.org  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A108228  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM

SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A113001  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD

SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555


 After Hours Phone:  
619-515-2555

License Number: A148014


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555


 After Hours Phone:  
619-515-2555


License Number: A149063

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N


 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 **Website:** [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 **Phone:** 619-515-2555

 **After Hours Phone:**  
619-515-2555

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

**Site English Spoken:** Yes  
**Cultural Competency:** No

 **Hours:** SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 **Accessibility:** CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 **Website:** [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 **Phone:** 619-515-2555

 **After Hours Phone:**  
619-515-2555

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

**Site English Spoken:** Yes  
**Cultural Competency:** No

 **Hours:** SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 **Website:** [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 **Phone:** 619-515-2555

 **After Hours Phone:**  
619-515-2555


License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

**Site English Spoken:** Yes  
**Cultural Competency:** No

 **Hours:** SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 **Website:** [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC




























Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 **Phone:** 619-515-2555


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 After Hours Phone: 619-515-2555 License Number: A169342 NPI: 1134155377 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM American Sign Language (ASL):  Website: www.fhcsd.org N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org	Cultural Competency: No  Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM American Sign Language (ASL):  Website: www.fhcsd.org N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org
<b>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</b> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: A178499 NPI: 1134155377 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes	<b>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</b> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: A55932 NPI: 1134155377 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM	<b>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</b> Provider ID: 206361  8788 JAMACHA RD SPRING VALLE, CA 91977-4035  Phone: 619-515-2555  After Hours Phone: 619-515-2555 License Number: A68463 NPI: 1134155377 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A76059

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA

91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555


License Number: NP10943

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555


 After Hours Phone:  
619-515-2555


License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: PA54588


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM


WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN DIEGO


### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

Fax: 619-462-5584

 After Hours Phone:  
619-515-2555


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


## SPRING VALLEY

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLEY, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC



Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLEY, CA  
91977-4035

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所




 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A72005  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)


### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLEY, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: C174771  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM




American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO



 Website: [www.fhcsd.org](http://www.fhcsd.org)

### VISTA



#### VCC DURIAN

Provider ID: 411518  
 105 DURIAN ST STE A  
VISTA, CA 92083-6206  
 Phone: 844-308-5003  
Fax: 760-414-3892  
 After Hours Phone:  
844-308-5003  
NPI: 1598122871




Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM

SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A



#### VCC DURIAN

Provider ID: 411518  
 105 DURIAN ST STE A  
VISTA, CA 92083-6206  
 Phone: 844-308-5003  
Fax: 760-414-3892  
 After Hours Phone:  
844-308-5003  
License Number: 1851300123  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A  
VISTA, CA 92083-6206

Phone: 844-308-5003

Fax: 760-414-3892

After Hours Phone:  
844-308-5003

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD  
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD  
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD  
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A


### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:  
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 135 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: A60517

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A


### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 136 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000


Fax: 760-414-3892


 After Hours Phone:  
760-631-5000

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: Yes

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-631-5000  
After Hours Phone:  
760-631-5000

License Number: C52564  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-631-5000  
After Hours Phone:  
760-631-5000

License Number: DC32054  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-631-5000  
After Hours Phone:  
760-631-5000

License Number: DPM3999  
NPI: 1598122871  
Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-631-5000  
After Hours Phone:  
760-631-5000

License Number: G51286  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: G79676

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: G86902

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: NP10896

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: NP95003571


NPI: 1598122871


Accepting New Patients: Yes

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## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: NP95009149

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: NP95009284

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes


 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: NP95016368

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA




 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

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## B. 联邦合资质的健康诊所

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000

License Number: PA19629

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N




 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 844-308-5003  
 After Hours Phone:  
844-308-5003

License Number: NP11448

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N




 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 844-308-5003  
 After Hours Phone:  
844-308-5003

License Number: PA20775

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM


SA 8:00AM-8:00PM

American Sign Language (ASL):

N




 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000

License Number: 20A8949

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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## B. 联邦合资质的健康诊所


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: A125026

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: A173511

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: A56214

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: A62780

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish










Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

<p>WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p><b>VISTA COMMUNITY CLINIC</b> Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C143703 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p>	<p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C162072 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p>
<p><b>VISTA COMMUNITY CLINIC</b> Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: A80635 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p><b>VISTA COMMUNITY CLINIC</b> Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C171929 NPI: 1598122871</p> <p>Accepting New Patients: Yes</p>	

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## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM N

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218

Phone: 760-414-3892

After Hours Phone:  
760-414-3892

License Number: DC31392

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM N

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218

Phone: 760-414-3892

After Hours Phone:  
760-414-3892

License Number: NP23217

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM N

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR  
VISTA, CA 92084-5218

Phone: 760-414-3892

After Hours Phone:  
760-414-3892

License Number: NP95003087

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


### VISTA COMMUNITY CLINIC

Provider ID: 206338


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## B. 联邦合资质的健康诊所

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-414-3892

Fax: 760-414-3892

 After Hours Phone:  
760-414-3892


License Number: 20A9149

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: 20A13745

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: 20A18374

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: 20A7241

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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*PROVIDER*





























*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)*

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## C. 初级保健目录

<b>ALPINE</b>		
<b><u>CERTIFIED NURSE PRACTITIONER</u></b>		
<b>KAHL, NICHOLAS</b>		
Provider ID: 517802		
Provider Gender: Male		
License Number: NP95006360		
NPI: 1821306598		
<input type="checkbox"/> Provider English Spoken: Y		
Cultural Competency: N		
Board Certified Specialty: No		
IHP OF SOUTHERN CAL-PHP		
	1620 ALPINE BLVD STE 110 ALPINE, CA 91901	
	Phone: (619) 662-4100	
	After Hours Phone: (619) 662-4100	
	Website: <a href="http://www.mtnhealth.org">www.mtnhealth.org</a>	
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
	Accessibility: CONTACT PROVIDER	
<b><u>CERTIFIED NURSE PRACTITIONER</u></b>		
<b>SANDERS, JESSICA</b>		
Provider ID: 517802		
Provider Gender: Female		
License Number: NP23004		
NPI: 1760765333		
<input type="checkbox"/> Provider English Spoken: Y		
Cultural Competency: N		
Board Certified Specialty: No		
IHP OF SOUTHERN CAL-PHP		
	1620 ALPINE BLVD STE 110 ALPINE, CA 91901	
	Phone: (619) 662-4100	
	After Hours Phone: (619) 662-4100	
	Website: <a href="http://www.mtnhealth.org">www.mtnhealth.org</a>	
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
	Accessibility: CONTACT PROVIDER	
<b><u>CHIROPRACTOR</u></b>		
<b>KELCHNER, MATTHEW</b>		
Provider ID: 517802		
Provider Gender: Male		
License Number: DC22733		
NPI: 1174656755		
IHP OF SOUTHERN CAL-PHP		
	1620 ALPINE BLVD STE 110 ALPINE, CA 91901	
	Phone: (619) 662-4100	
	Fax: (619) 205-6305	
	After Hours Phone: (619) 662-4100	
	Website: <a href="http://www.mtnhealth.org">www.mtnhealth.org</a>	
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
	Accessibility: CONTACT PROVIDER	
<b><u>CHIROPRACTOR</u></b>		
<b>ABDULRAHIM, AHMED</b>		
Provider ID: 517802		
Provider Gender: Male		
License Number: DC28335		
NPI: 1619040292		
<input type="checkbox"/> Provider English Spoken: Y		
<input type="checkbox"/> Provider Language(s) Spoken: Burmese		
Cultural Competency: N		
Board Certified Specialty: No		
IHP OF SOUTHERN CAL-PHP		
	1620 ALPINE BLVD STE 110 ALPINE, CA 91901	
	Phone: (619) 662-4100	
	Fax: (619) 205-6305	
	After Hours Phone: (619) 662-4100	
	Website: <a href="http://www.mtnhealth.org">www.mtnhealth.org</a>	
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
	Accessibility: CONTACT PROVIDER	
<b><u>CHIROPRACTOR</u></b>		
<b>ABDULRAHIM, AHMED</b>		
Provider ID: 517802		
Provider Gender: Male		
License Number: DC28335		
NPI: 1619040292		
<input type="checkbox"/> Provider English Spoken: Y		
<input type="checkbox"/> Provider Language(s) Spoken: Burmese		
Cultural Competency: N		
Board Certified Specialty: No		
IHP OF SOUTHERN CAL-PHP		
	1620 ALPINE BLVD STE 110 ALPINE, CA 91901	
	Phone: (619) 662-4100	
	Fax: (619) 205-6305	
	After Hours Phone: (619) 662-4100	
	Website: <a href="http://www.mtnhealth.org">www.mtnhealth.org</a>	
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
	Accessibility: CONTACT PROVIDER	




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619)*  
*662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**


#### **BAUTISTA, LUIS**

*Provider ID: 517802*  
*Provider Gender: Male*  
*License Number: A97270*  
*NPI: 1295712206*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
*COMMUNITY REGIONAL*  
*MEDICAL CENTER-FRESNO,*  
*ST AGNES MEDICAL CENTER*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901

 *Phone: (619) 662-4100*  
 *After Hours Phone: (619)*  
*662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

### **FAMILY PRACTICE**

#### **DUBE, BIANCA**

*Provider ID: 517802*  
*Provider Gender: Female*  
*License Number: C172036*  
*NPI: 1740535152*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
*MEMORIAL HOSPITAL*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*






 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
*Fax: (619) 205-6305*  
 *After Hours Phone: (619)*  
*662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*

*PROVIDER*

### **FAMILY PRACTICE**

#### **KAUFHOLD, ANNE**

*Provider ID: 517802*  
*Provider Gender: Female*  
*License Number: A88893*  
*NPI: 1164508073*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Arabic, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
*MERCY HOSPITAL CHULA*  
*VISTA*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619)*  
*662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*








### **FAMILY PRACTICE**

#### **VAN HOLLEBEKE, RACHEL**

*Provider ID: 517802*  
*Provider Gender: Female*  
*License Number: A177337*  
*NPI: 1497217756*



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## C. 初级保健目录

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

#### **WYLIE, BLAKE**






*Provider ID: 517802*  
*Provider Gender: Male*  
*License Number: 20A11088*  
*NPI: 1922314145*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1620 ALPINE BLVD STE 110

ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FQHC**









#### **SAN YSIDRO HEALTH ALPINE**

##### **FAMILY MEDICINE,**

*Provider ID: 517802*  
*NPI: 1770124315*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*IHP OF SOUTHERN CAL-PHP*  
 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
*Fax: (619) 320-3347*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.mtnhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*



### **PEDIATRICS**

#### **STENSMAN, LARS**

*Provider ID: 595793*  
*Provider Gender: Male*  
*NPI: 1659638062*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 1620 ALPINE BLVD STE 110  
 ALPINE, CA 91901  
 *Phone: (619) 662-4100*  
*Fax: (619) 205-6305*  
 *After Hours Phone: (619) 662-4100*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**

#### **STENSMAN, LARS**


*Provider ID: 517802*  
*Provider Gender: Male*  
*License Number: A158569*  
*NPI: 1659638062*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

 *Phone: (619) 662-4100*


 *After Hours Phone: (619)  
662-4100*

 *Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

### **PHYSICIANS ASSISTANT**

#### **BAISLEY, SHAWN**

*Provider ID: 517802*


*Provider Gender: Male*


*License Number: PA52347*


*NPI: 1376936120*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)  
662-4100*

 *Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

### **PHYSICIANS ASSISTANT**

#### **SHARPE, NORMA**

*Provider ID: 517802*

*Provider Gender: Female*


*License Number: PA20490*


*NPI: 1619100237*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)  
662-4100*

 *Website: www.mtnhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

### **BORREGO SPRINGS**

#### **DERMATOLOGY**


#### **GREENWAY, HUBERT**

*Provider ID: 185179*

*Provider Gender: Male*

*License Number: C39104*

*NPI: 1366419004*


 *Provider English Spoken: Y*


*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL*

*Board Certified Specialty: No*  
*BORREGO COMMUNITY  
HEALTH FOUNDTION*

 4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

 *Phone: (760) 767-5051*

 *After Hours Phone: (760)  
767-5051*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

#### **DERMATOLOGY**

#### **ZELAC, DANIEL**

*Provider ID: 185179*

*Provider Gender: Male*

*License Number: G85319*

*NPI: 1891709903*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS GREEN  
HOSPITAL*

*Board Certified Specialty: No*  
*BORREGO COMMUNITY  
HEALTH FOUNDTION*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录



 4343 YAQUI PASS RD  
 BORREGO SPRINGS, CA  
 92004  
 Phone: (760) 767-5051  
 Fax: (760) 767-4552  
 After Hours Phone: (760)  
 767-5051  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### FAMILY PRACTICE

#### **GHAFARI, DAUOD**


Provider ID: 185179  
 Provider Gender: Male  
 License Number: A98486  
 NPI: 1053417691  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi, Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 BORREGO COMMUNITY  
 HEALTH FOUNDTION


 4343 YAQUI PASS RD  
 BORREGO SPRINGS, CA  
 92004  
 Phone: (760) 767-5051  
 After Hours Phone: (760)  
 767-5051  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):




N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM


### FQHC



#### **BORREGO MEDICAL CLINIC,**

Provider ID: 185179  
 NPI: 1134144165  
 Provider English Spoken: Y  
 Cultural Competency: N  
 BORREGO COMMUNITY  
 HEALTH FOUNDTION

 4343 YAQUI PASS RD  
 BORREGO SPRINGS, CA  
 92004

 Phone: (760) 767-5051  
 Fax: (760) 767-4552  
 After Hours Phone: (760)  
 767-5051

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N








 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **CAMPO**

### CERTIFIED NURSE PRACTITIONER



#### **LIEBER, CAROL**

Provider ID: 519686  
 Provider Gender: Female  
 License Number: NP20849  
 NPI: 1487889846

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1388 BUCKMAN SPRINGS  
 RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: www.syhealth.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### FAMILY PRACTICE

#### **BAUM, PETER**



Provider ID: 519686  
 Provider Gender: Male  
 License Number: 20A14949  
 NPI: 1174919971  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS  
 RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER




### FAMILY PRACTICE

#### BAUM, PETER

Provider ID: 549082  
 Provider Gender: Male  
 NPI: 1174919971  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK

 1388 BUCKMAN SPRINGS RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 Fax: (619) 824-9071  
 After Hours Phone: (619) 662-4100

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 10AM-4PM  
 M-F 8:30AM-5:30PM  
 SA 8AM-2:30PM



### FAMILY PRACTICE



#### CORONADO, MYRNA

Provider ID: 519686  
 Provider Gender: Female  
 License Number: A112627  
 NPI: 1710147566

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

#### KAUFHOLD, ANNE

Provider ID: 519686  
 Provider Gender: Female  
 License Number: A88893  
 NPI: 1164508073



Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Arabic, Spanish

Cultural Competency: N  
 Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS RD  
 CAMPO, CA 91906  
 Phone: (619) 445-6200  
 After Hours Phone: (619) 445-6200

 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER



### FAMILY PRACTICE

#### MCINTYRE, RYAN

Provider ID: 519686  
 Provider Gender: Male  
 License Number: A133029  
 NPI: 1164776555

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,  
 GROSSMONT HOSPITAL  
 Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
 1388 BUCKMAN SPRINGS RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

#### **ORTIZ, KENNETH**

*Provider ID: 519686*  
*Provider Gender: Male*  
*License Number: A156607*  
*NPI: 1356761571*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation:*

*GROSSMONT HOSPITAL,*  
*SCRIPPS MEMORIAL*  
*HOSPITAL*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

📍 *1388 BUCKMAN SPRINGS RD*  
*CAMPO, CA 91906*

☎ *Phone: (619) 662-4100*

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

#### **ROGERS, MATTHEW**

*Provider ID: 519686*  
*Provider Gender: Male*  
*License Number: 20A18400*  
*NPI: 1639606130*

☑ *Provider English Spoken: Y*  
☑ *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

📍 *1388 BUCKMAN SPRINGS RD*  
*CAMPO, CA 91906*

☎ *Phone: (619) 662-4100*

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

#### **ROGERS, MATTHEW**

*Provider ID: 530207*  
*Provider Gender: Male*  
*NPI: 1639606130*

☑ *Provider English Spoken: Y*  
☑ *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Board Certified Specialty: No*

#### **RADY CHILDRENS HEALTH NETWORK**

📍 *1388 BUCKMAN SPRINGS RD*  
*CAMPO, CA 91906*

☎ *Phone: (619) 662-4100*  
*Fax: (619) 824-9071*

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

#### **SAIDRO, LUZVIMINDA**

*Provider ID: 519686*  
*Provider Gender: Female*  
*License Number: A93746*  
*NPI: 1750364386*

☑ *Provider English Spoken: Y*  
☑ *Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*  
*Hospital Affiliation: UC DAVIS MEDICAL CTR*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*




📍 *1388 BUCKMAN SPRINGS RD*  
*CAMPO, CA 91906*

☎ *Phone: (619) 662-4100*

☎ *After Hours Phone: (619) 662-4100*








了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM



### FQHC

#### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,

Provider ID: 519686  
 NPI: 1174164719  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 1388 BUCKMAN SPRINGS  
 RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 Fax: (619) 478-9164  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE



**IBANEZ, SIR CEDRIC**  
 Provider ID: 519686

Provider Gender: Male  
 License Number: A112484  
 NPI: 1841496452  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: NATIVIDAD  
 MEDICAL CENTER

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS  
 RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER







### PHYSICIANS ASSISTANT

**SHARPE, NORMA**  
 Provider ID: 519686  
 Provider Gender: Female  
 License Number: PA20490  
 NPI: 1619100237  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1388 BUCKMAN SPRINGS  
 RD

CAMPO, CA 91906  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### CARLSBAD


#### CERTIFIED NURSE PRACTITIONER

**YOUNG, JENNIFER**  
 Provider ID: 480120  
 Provider Gender: Female  
 License Number: NP95003087  
 NPI: 1558701094  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1295 CARLSBAD VILLAGE  
 DR STE 100  
 CARLSBAD, CA 92008  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
 736-6767  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **YOUNG, JENNIFER**

Provider ID: 480120


Provider Gender: Female


License Number: NP95003087


NPI: 1558701094

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **FQHC**

---


#### **TRUECARE,**


Provider ID: 480120

NPI: 1245246917

 Provider English Spoken: Y  
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

 Phone: (760) 736-6767

Fax: (760) 720-7204

 After Hours Phone: (760)  
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **INTERNAL MEDICINE**

---

#### **PONIACHIK, SAMUEL**

Provider ID: 480120

Provider Gender: Male

License Number: G74757


NPI: 1467485078


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **INTERNAL MEDICINE**

---

#### **PONIACHIK, SAMUEL**

Provider ID: 480120

Provider Gender: Male

License Number: G74757


NPI: 1467485078


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **OBSTETRICS / GYNECOLOGY**

---

#### **POUNTNEY, MARLENE**

Provider ID: 480120


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Provider Gender: Female*

*License Number: A93248*

*NPI: 1174703680*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY*


*MEDICAL CTR, PALOMAR*


*MEDICAL CENTER*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 1295 CARLSBAD VILLAGE  
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)  
736-6767*


 *Website: N/A*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-2PM*

### **OBSTETRICS / GYNECOLOGY**

#### **POUNTNEY, MARLENE**


*Provider ID: 480120*

*Provider Gender: Female*

*License Number: A93248*

*NPI: 1174703680*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY*


*MEDICAL CTR, PALOMAR*


*MEDICAL CENTER*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 1295 CARLSBAD VILLAGE  
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)  
736-6767*

 *Website: N/A*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-2PM*


### **PEDIATRICS**

#### **BURGAMY, ELIZABETH**

*Provider ID: 326275*

*Provider Gender: Female*

*NPI: 1164609558*

 *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MEMORIAL HOSPITAL*

*ENCINITAS, SHARP*

*MEMORIAL HOSPITAL,*


*SCRIPPS MEMORIAL*


*HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

#### **NETWORK**

 3257 CAMINO DE LOS  
COCHES STE 202  
CARLSBAD, CA 92009

 *Phone: (760) 633-3640*  
*Fax: (760) 633-3644*

 *After Hours Phone: (760)  
633-3640*

 *Website: N/A*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**

#### **IYENGAR, RADHA**


*Provider ID: 480120*

*Provider Gender: Female*

*License Number: A49273*

*NPI: 1265448112*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Hindi, Spanish,  
Tagalog, Tamil*


*Cultural Competency: N*


*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 1295 CARLSBAD VILLAGE  
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)  
736-6767*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 328451

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **PEDIATRICS**

#### **IYENGAR, RADHA**


Provider ID: 480120

Provider Gender: Female

License Number: A49273


NPI: 1265448112


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hindi, Spanish,  
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767


 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **PEDIATRICS**

#### **MUTH, NATALIE**

Provider ID: 328451

Provider Gender: Female

NPI: 1497982888

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

 3257 CAMINO DE LOS  
COCHES STE 202  
CARLSBAD, CA 92009

 Phone: (760) 633-3640

Fax: (760) 633-3644

 After Hours Phone: (760)  
633-3640


 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

---

### **PEDIATRICS**

#### **O'CONNOR, ERICA**


Provider ID: 651599


Provider Gender: Female

NPI: 1134782725


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3257 CAMINO DE LOS  
COCHES STE 202  
CARLSBAD, CA 92009

 Phone: (760) 633-3640

Fax: (760) 633-3644

 After Hours Phone: (760)  
633-3640


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

---

### **PEDIATRICS**


#### **TANAKA, MARY**

Provider ID: 465387

Provider Gender: Female

NPI: 1295962686

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Thai


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH



NETWORK

 3257 CAMINO DE LOS  
COCHES STE 202

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## C. 初级保健目录



CARLSBAD, CA 92009  
 Phone: (760) 633-3640  
 Fax: (760) 633-3644  
 After Hours Phone: (760) 633-3640  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **ZACHRY, ALISON**

Provider ID: 480120  
 Provider Gender: Female  
 License Number: A131678  
 NPI: 1922402858  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 8AM-2PM

### **PEDIATRICS**

#### **ZACHRY, ALISON**

Provider ID: 480120  
 Provider Gender: Female  
 License Number: A131678  
 NPI: 1922402858  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 8AM-2PM


### **PHYSICIANS ASSISTANT**


#### **CHISWICK, GARY**

Provider ID: 480120  
 Provider Gender: Male  
 License Number: PA22667  
 NPI: 1174964001


Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation:

GROSSMONT HOSPITAL  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008


 Phone: (760) 736-6767  
 Fax: (760) 720-7204

 After Hours Phone: (760) 736-6767

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 480120  
 Provider Gender: Male  
 License Number: PA22667  
 NPI: 1174964001

Provider English Spoken: Y  
 Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

### PHYSICIANS ASSISTANT

#### RUSSO, KRISTA

Provider ID: 480120

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

### PHYSICIANS ASSISTANT

#### RUSSO, KRISTA

Provider ID: 480120

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

### CHULA VISTA

### CERTIFIED NURSE

### PRACTITIONER

#### CHAPIN, DENISE

Provider ID: 206355

Provider Gender: Female

License Number: NP23687

NPI: 1952737033

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

251 LANDIS AVE  
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)  
515-2500

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE

### PRACTITIONER

#### FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

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## C. 初级保健目录

### SAN DIEGO



 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER


#### IBARRA, MARTHA

Provider ID: 427322  
Provider Gender: Female  
License Number: NP12112  
NPI: 1114957289  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)






/clinics/chula- vista- medic  
al- plaza

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### LEONARD, BEVERLY



Provider ID: 206355  
Provider Gender: Female  
License Number: NP10943  
NPI: 1285772392  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO






 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE

### PRACTITIONER


#### OWEN, MICHAEL

Provider ID: 206355  
Provider Gender: Female  
License Number: NP95001492  
NPI: 1073869145  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### QUILALANG, SUSAN

Provider ID: 427322  
Provider Gender: Female  
License Number: NP5579  
NPI: 1841200482  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **QUILALANG, SUSAN**

Provider ID: 427322  
Provider Gender: Female  
License Number: RN371480  
NPI: 1841200482  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER





### **CERTIFIED NURSE PRACTITIONER**

#### **ROSS, CRYSTAL**

Provider ID: 427322  
Provider Gender: Female  
License Number: NP95015413  
NPI: 1548683378

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, GROSSMONT  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **SICKLES, MAGGIE**

Provider ID: 427322  
Provider Gender: Female  
License Number: NP22000  
NPI: 1821346826

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)



Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **VEGA, TERESA**

Provider ID: 206355  
Provider Gender: Female  
License Number: NP95001705  
NPI: 1912304569


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


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## C. 初级保健目录

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
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 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



---

### CERTIFIED NURSE PRACTITIONER

---


#### **WILLIAMS, TAKISHA**


Provider ID: 206355  
Provider Gender: Female  
License Number: NP95013978  
NPI: 1881727386

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



---

### CERTIFIED REGISTERED NURSE MIDWIFE

---


#### **BOSTON, LAURA**

Provider ID: 206355  
Provider Gender: Female  
License Number: NM792  
NPI: 1174553259

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



---

### CERTIFIED REGISTERED NURSE MIDWIFE

---


#### **MARTINEZ, NANCY**


Provider ID: 427322  
Provider Gender: Female  
License Number: NM1539  
NPI: 1578576070

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### CHIROPRACTOR

---

#### **HASHEM, SHIVA**

Provider ID: 206355  
Provider Gender: Female  
License Number: DC26269  
NPI: 1952950776

 Provider English Spoken: Y  
Cultural Competency: N



Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 251 LANDIS AVE  
CHULA VISTA, CA 91910

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## C. 初级保健目录

 Phone: (619) 515-2500  
 After Hours Phone: (619) 515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **CHIROPRACTOR**


#### **KAZEM, HARON**

Provider ID: 427322

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Farsi, Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

### **CHIROPRACTOR**


#### **PLANTE, CHARLES**

Provider ID: 427322

Provider Gender: Male

License Number: DC31963

NPI: 1760464960


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **CHIROPRACTOR**


#### **REYNOSO, ALFONSO**

Provider ID: 427322

Provider Gender: Male

License Number: DC20760

NPI: 1285921627


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

#### **CARRILLO, MARITZA**

Provider ID: 427322

Provider Gender: Female

License Number: A163183

NPI: 1649628587

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### ENDOCRINOLOGY

#### METABOLISM DIABETES


#### **CRUZ, MICHAEL**

Provider ID: 427322

Provider Gender: Male

License Number: A138772

NPI: 1265851133

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### ENDOCRINOLOGY

#### METABOLISM DIABETES

#### **VINCENT, LAUREN**

Provider ID: 427322


Provider Gender: Female

License Number: A134303


NPI: 1053757997


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE


#### **ALANIZ, MATEO**

Provider ID: 427322

Provider Gender: Male

License Number: A124388

NPI: 1700175577

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

#### **AMANAT, SOROOSH**

Provider ID: 427322

Provider Gender: Male

License Number: A153022

NPI: 1003279621

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

### FAMILY PRACTICE

#### ARCE GOMEZ, LAURA

Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: CHULA  
VISTA COMM HOSP

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

#### CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

251 LANDIS AVE  
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)  
515-2500

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### ELSAIED, MOHAMMED

Provider ID: 19561

Provider Gender: Male

NPI: 1821033424

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, German,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*CHULA VISTA MED CTR,*  
*SCRIPPS MERCY HOSPITAL*  
*CHULA VISTA, SCRIPPS*  
*MEMORIAL HOSPITAL,*  
*PARADISE VALLEY HOSPITAL,*  
*SCRIPPS MERCY HOSPITAL*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 330 OXFORD ST STE 106  
 CHULA VISTA, CA 91911  
 Phone: (619) 409-1802  
 Fax: (619) 409-1831  
 After Hours Phone: (619)  
 409-1802  
 Website: N/A  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 9AM-5PM  
 F 8AM-4PM

### **FAMILY PRACTICE**



#### **ELSAYED, MOHAMMED**

*Provider ID: 19561*  
*Provider Gender: Male*  
*NPI: 1821033424*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Arabic, German,*  
*Spanish*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP*  
*CHULA VISTA MED CTR,*  
*SCRIPPS MERCY HOSPITAL*  
*CHULA VISTA, SCRIPPS*  
*MEMORIAL HOSPITAL,*  
*PARADISE VALLEY HOSPITAL,*  
*SCRIPPS MERCY HOSPITAL*  
*Board Certified Specialty: No*  
*IMPERIAL HEALTH HOLDINGS*  
*MEDICAL GROUP-SD*  
 330 OXFORD ST STE 106  
 CHULA VISTA, CA 91911  
 Phone: (619) 409-1802  
 Fax: (619) 409-1831  
 After Hours Phone: (619)  
 409-1802  
 Website: N/A  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 9AM-5PM  
 F 8AM-4PM

### **FAMILY PRACTICE**




#### **GARCIA, KARLA**

*Provider ID: 427322*  
*Provider Gender: Female*  
*License Number: A120672*  
*NPI: 1154647410*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SCRIPPS*  
*MERCY HOSPITAL CHULA*  
*VISTA, SCRIPPS MEMORIAL*  
*HOSPITAL*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**



#### **HUBLEY, PAUL**


*Provider ID: 206355*  
*Provider Gender: Male*  
*License Number: A73172*  
*NPI: 1568496974*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*  
 251 LANDIS AVE  
 CHULA VISTA, CA 91910

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

 Phone: (619) 515-2500  
 After Hours Phone: (619) 515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**



#### **JIMENEZ, KRYSTAL**


Provider ID: 427322  
 Provider Gender: Female  
 License Number: A159831  
 NPI: 1922531250

 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**


#### **LACH, REBECCA**


Provider ID: 427322

Provider Gender: Female

License Number: A177922

NPI: 1679137780



 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **LAW, KAREN**

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y



 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **MCKENNETT, MARIANNE**

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

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## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **MENON, POOJA**

Provider ID: 427322

Provider Gender: Female


License Number: A123263

NPI: 1053600064


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **MERRILL, SARAH**

Provider ID: 427322

Provider Gender: Female

License Number: A123492

NPI: 1225399512

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **MOYA, MARY**

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **NGUYEN, CARIE**

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y

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## C. 初级保健目录

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **NGUYEN, LINH**

Provider ID: 417641  
Provider Gender: Female  
License Number: A144995  
NPI: 1619357993  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
352 L ST  
CHULA VISTA, CA 91911

Phone: (619) 515-2325  
After Hours Phone: (619)  
515-2325  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **PALOMINO, MARY**

Provider ID: 427322  
Provider Gender: Female  
License Number: A115699  
NPI: 1770718975  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **PEDROTTY, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G80234  
NPI: 1992861629

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **PEREZ, PERLITA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 206355  
Provider Gender: Female  
License Number: A119689  
NPI: 1174810972

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER







### **FAMILY PRACTICE**

#### **PIEROS, JANELLE**

Provider ID: 427322  
Provider Gender: Female  
License Number: 20A13225  
NPI: 1386935914

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Faroese, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP





 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM


### **FAMILY PRACTICE**

#### **PINA, RAQUEL**

Provider ID: 206355  
Provider Gender: Female  
License Number: A177698  
NPI: 1255893368

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER


### **FAMILY PRACTICE**

#### **PISINGER, PATRICIA**

Provider ID: 427322  
Provider Gender: Female  
License Number: A69264  
NPI: 1861428302

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **ROSENBLATT, EUGENE**

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

Provider ID: 427322  
 Provider Gender: Male  
 License Number: 20A9060  
 NPI: 1427123991  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**




#### **SERPAS, SHAILA**




Provider ID: 427322  
 Provider Gender: Female  
 License Number: G74728  
 NPI: 1124039136  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY  
 HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS  
 MEMORIAL HOSPITAL  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**


#### **SHAHTAJI, ALAN**

Provider ID: 427322  
 Provider Gender: Male  
 License Number: 20A11087  
 NPI: 1972751089  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

#### **SWARTZ, JOHN**

Provider ID: 427322  
 Provider Gender: Male  
 License Number: G72486  
 NPI: 1396754131  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY  
 HOSPITAL, LOS ANGELES  
 COUNTY HARBOR UCLA  
 MEDICAL CENTER  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)



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 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*al- plaza*  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **TALAVERA, GREGORY**

Provider ID: 427322  
Provider Gender: Male  
License Number: A40061  
NPI: 1740337161  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)





Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):



N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **TEE, ALEXANDRA**



Provider ID: 427322  
Provider Gender: Female  
License Number: A164392  
NPI: 1881198406  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**


#### **TOLEDO-NADER, CAROLL**

Provider ID: 427322  
Provider Gender: Male  
License Number: A41486  
NPI: 1427126648  
 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **TREJO, RAUL**

Provider ID: 427322  
Provider Gender: Male  
License Number: A77936  
NPI: 1174534184  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


#### **VELASQUEZ, SHARON**

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


#### **WHITLEY, NICHOLAS**

Provider ID: 427322

Provider Gender: Male

License Number: A118250

NPI: 1629394721

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **YOON, RYAN**

Provider ID: 427322

Provider Gender: Male

License Number: A114600

NPI: 1942435144

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FQHC**

#### **CHULA VISTA FAMILY HLTH CTR,**

Provider ID: 206355

NPI: 1346480837

 Provider English Spoken: Y

Cultural Competency: N

FAMILY HEALTH CENTERS OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
Fax: (619) 397-1161  
 After Hours Phone: (619)  
515-2500  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM


### FQHC

#### CHULA VISTA PEDIATRICS,


Provider ID: 482034  
NPI: 1326486861  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP  
 855 3RD AVE STE 2200  
CHULA VISTA, CA 91911  
 Phone: (619) 662-4100  
Fax: (619) 662-4196  
 After Hours Phone: (619)  
662-4100  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-4PM




### FQHC

#### FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641  
NPI: 1083959464  
 Provider English Spoken: Y  
Cultural Competency: N  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 352 L ST  
CHULA VISTA, CA 91911  
 Phone: (619) 515-2325  
Fax: (619) 420-0660

 After Hours Phone: (619)  
515-2325

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### FQHC

#### SAN YSIDRO HEALTH CHULA VISTA,








Provider ID: 427322  
NPI: 1326486861  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 425-6941  
 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-4PM

### FQHC

#### SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 664445  
NPI: 1184135873  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP  
 280 E ST  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 426-2170  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### GENERAL DENTISTRY


#### PHAM, QUYNH

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## C. 初级保健目录

Provider ID: 427322  
Provider Gender: Female  
License Number: DDS102880  
NPI: 1366917353

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### GENERAL PRACTICE

#### **SAMI, REMAN**

Provider ID: 427322  
Provider Gender: Female  
License Number: 20A19457  
NPI: 1295362242

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### HEMATOLOGY / ONCOLOGY


#### **QUIROZ, ELISA**


Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)


[/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE

#### **CHEN, TSUH-YIN**


Provider ID: 427322

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Portuguese,  
Spanish




Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

N

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**


#### **HAMMETT, ERIN**

*Provider ID: 427322*

*Provider Gender: Female*

*License Number: 20A14025*

*NPI: 1467884098*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CORONADO HOSP AND*

*HEALTHCARE CTR, SANTA*


*BARBARA COTTAGE HOSP,*

*GOLETA VALLEY COTTAGE*


*HOSP*


*Board Certified Specialty: No*


*IHP OF SOUTHERN CAL-PHP*

 *678 3RD AVE*

*CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **INTERNAL MEDICINE**


#### **KAKAIYA, ROSHNI**

*Provider ID: 427322*

*Provider Gender: Female*

*License Number: 20A19485*

*NPI: 1073179529*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL CHULA*


*VISTA*


*Board Certified Specialty: No*


*IHP OF SOUTHERN CAL-PHP*

 *678 3RD AVE*

*CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **INTERNAL MEDICINE**

#### **KIM, JIUN**

*Provider ID: 427322*


*Provider Gender: Female*

*License Number: C182935*


*NPI: 1598020752*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 *678 3RD AVE*

*CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

#### **UWEDJOJEVWE, LETICIA**

*Provider ID: 380242*

*Provider Gender: Female*

*NPI: 1891882221*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SCRIPPS*

*MERCY HOSPITAL CHULA*

*VISTA*

*Board Certified Specialty: No*

*IMPERIAL HEALTH HOLDINGS*

*MEDICAL GROUP-SD*

 *340 4TH AVE STE 10*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

CHULA VISTA, CA 91910  
☎ Phone: (619) 934-2215  
Fax: (619) 500-5955  
🕒 After Hours Phone: (619) 934-2215  
🌐 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-TH 8AM-5PM  
F 8AM-4PM

### **INTERNAL MEDICINE**

#### **VELAZQUEZ CAMARENA, MARIA**

Provider ID: 427322  
Provider Gender: Female  
License Number: A56153  
NPI: 1518965714  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
📍 678 3RD AVE  
CHULA VISTA, CA 91910  
☎ Phone: (619) 662-4100  
🕒 After Hours Phone: (619) 662-4100  
🌐 Website: [www.syhealth.org/clinics/chula-vista-medic](http://www.syhealth.org/clinics/chula-vista-medic)

al- plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**

#### **WEN, AKI YEN CHANG**

Provider ID: 427322  
Provider Gender: Male  
License Number: 20A12555  
NPI: 1205126505  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
📍 678 3RD AVE  
CHULA VISTA, CA 91910  
☎ Phone: (619) 662-4100  
🕒 After Hours Phone: (619) 662-4100  
🌐 Website: [www.syhealth.org/clinics/chula-vista-medic](http://www.syhealth.org/clinics/chula-vista-medic)  
al- plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

Provider ID: 206355

Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO  
📍 251 LANDIS AVE  
CHULA VISTA, CA 91910  
☎ Phone: (619) 515-2500  
🕒 After Hours Phone: (619) 515-2500  
🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**


Provider ID: 206355  
Provider Gender: Female  
License Number: A68463  
NPI: 1376663831  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish

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## C. 初级保健目录



*Cultural Competency: N*  
*Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS*  
*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 515-2500*  
 *After Hours Phone: (619)  
515-2500*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*



### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

*Provider ID: 206355*  
*Provider Gender: Male*  
*License Number: A113001*  
*NPI: 1225231582*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,*




*GROSSMONT HOSPITAL, TRI  
CITY MEDICAL CTR*  
*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*



 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 515-2500*  
 *After Hours Phone: (619)  
515-2500*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F  
8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**

*Provider ID: 206355*  
*Provider Gender: Female*  
*License Number: A163464*  
*NPI: 1326531401*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital*  
*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*  
 251 LANDIS AVE

CHULA VISTA, CA 91910  
 *Phone: (619) 515-2500*  
 *After Hours Phone: (619)  
515-2500*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

*Provider ID: 206355*  
*Provider Gender: Male*  
*License Number: A108228*  
*NPI: 1629277322*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*  
 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 515-2500*  
 *After Hours Phone: (619)  
515-2500*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

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## C. 初级保健目录

### **DORUELO, ASHLEY**

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **LOEFFLER, ALLISON**

Provider ID: 206355

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **MENDEZ, DIEGO**

Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, KERN


MEDICAL CENTER


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206355

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**


#### **SEFA-BOAKYE, KOFI**

*Provider ID: 427322*

*Provider Gender: Male*

*License Number: G59670*

*NPI: 1902993660*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SHARP*


*CHULA VISTA MED CTR,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 *678 3RD AVE  
CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)  
662-4100*

 *Website: [www.syhealth.org/clinics/chula-vista-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**


#### **SHORT, ABIADE**

*Provider ID: 427322*

*Provider Gender: Male*

*License Number: A114893*

*NPI: 1750559589*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: PARADISE*


*VALLEY HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MERCY HOSPITAL*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 *678 3RD AVE  
CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)  
662-4100*


 *Website: [www.syhealth.org/clinics/chula-vista-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

*Provider ID: 206355*

*Provider Gender: Female*

*License Number: 20A13958*

*NPI: 1932269198*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: Sharp*


*Grossmont Hospital*


*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *251 LANDIS AVE  
CHULA VISTA, CA 91910*

 *Phone: (619) 515-2500*

 *After Hours Phone: (619)  
515-2500*

 *Website: [www.fhcsd.org](http://www.fhcsd.org)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **TRUJILLO, JENNIFER**

*Provider ID: 427322*

*Provider Gender: Female*

*License Number: 20A8204*

*NPI: 1053407593*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL CHULA  
VISTA, SHARP CHULA VISTA  
MED CTR*

*Board Certified Specialty: No*

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## C. 初级保健目录

### IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### WINESBURG, JENNIFER

Provider ID: 206355  
Provider Gender: Female  
License Number: 20A11535  
NPI: 1811162456  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
251 LANDIS AVE  
CHULA VISTA, CA 91910

Phone: (619) 515-2500  
After Hours Phone: (619) 515-2500  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### ZIEG, ALAN

Provider ID: 206355  
Provider Gender: Male  
License Number: G78814  
NPI: 1699790634  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
251 LANDIS AVE  
CHULA VISTA, CA 91910  
Phone: (619) 515-2500  
After Hours Phone: (619) 515-2500  
Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

### **OPHTHALMOLOGY**

#### MANI, NASRIN

Provider ID: 427322  
Provider Gender: Female  
License Number: A40473  
NPI: 1023061314  
Provider English Spoken: Y  
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **OPHTHALMOLOGY**

#### **PAPASTERGIU, GEORGIOS**

Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y


Provider Language(s)  
Spoken: Arabic, Farsi,  
French, Greek, Italian,  
Spanish

Cultural Competency: N


Hospital Affiliation: EL


CENTRO REGIONAL MEDICAL  
CENTER, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PROVIDER

 Hours: M-F 8AM-5PM

### **OPHTHALMOLOGY**

#### **PONS, MAURICIO**

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL, EL  
CENTRO REGIONAL MEDICAL  
CENTER, SHARP MEMORIAL  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OPHTHALMOLOGY**

#### **SKAF, AYHAM**

Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y


Provider Language(s)  
Spoken: Arabic, Spanish

Cultural Competency: N


Hospital Affiliation: EL


CENTRO REGIONAL MEDICAL  
CENTER, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **AKASHI, MARC**

Provider ID: 163322

Provider Gender: Male

NPI: 1205002417



Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 769 MEDICAL CENTER CT STE 300  
 CHULA VISTA, CA 91911  
 Phone: (619) 482-3090  
 Fax: (619) 482-7350

 After Hours Phone: (619) 482-3090


 Website: N/A


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**


#### **ATIENZA, PAMELA**

*Provider ID: 106987*

*Provider Gender: Female*

*NPI: 1417916107*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Tagalog*


*Cultural Competency: N*

*Hospital Affiliation: SHARP*

#### **CHULA VISTA MED CTR**

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 890 EASTLAKE PKWY STE 200  
 CHULA VISTA, CA 91914

 Phone: (619) 656-6817

Fax: (619) 656-6908

 After Hours Phone: (619) 506-1218

 Website: N/A


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM*


### **PEDIATRICS**


#### **BARBADILLO, FERDINAND**

*Provider ID: 70456*

*Provider Gender: Male*

*NPI: 1982662193*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*


*Hospital Affiliation: SHARP*

#### **CHULA VISTA MED CTR**

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 890 EASTLAKE PKWY STE 200

CHULA VISTA, CA 91914

 Phone: (619) 656-6817

Fax: (619) 656-6908

 After Hours Phone: (619) 656-6817

 Website: N/A


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*

### **PEDIATRICS**

#### **BROUDY, ABRAHAM**

*Provider ID: 109328*

*Provider Gender: Male*

*NPI: 1528039526*

 *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL CHULA*

*VISTA, RADY CHILDRENS*

*HOSPITAL SAN DIEGO, SHARP*

*CHULA VISTA MED CTR,*


*SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

*NETWORK*

 2440 FENTON ST STE 100  
 CHULA VISTA, CA 91914

 Phone: (619) 656-3040

Fax: (619) 656-3045

 After Hours Phone: (619) 656-3040

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


### **PEDIATRICS**


#### **CAPETANAKIS, ELENI**

Provider ID: 89610

Provider Gender: Female

NPI: 1346211554

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Greek, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR


Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

 865 3RD AVE STE 101

CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)

426-7910

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM


### **PEDIATRICS**

#### **CORDOBA, MIGUEL**

Provider ID: 88187

Provider Gender: Male

NPI: 1053382176

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 865 3RD AVE STE 101

CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)

426-7910

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **DONG, TAMMY**


Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

 Provider English Spoken: Y


 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

### **PEDIATRICS**

#### **DORINGO, ELAINIE**


Provider ID: 267100

Provider Gender: Female


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1013005636

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: ALVARADO HOSPITAL LLC, RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 865 3RD AVE STE 101  
CHULA VISTA, CA 91911

 Phone: (619) 426-7910  
Fax: (619) 426-2337

 After Hours Phone: (619) 426-7910

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **FLETCHER, EMILY**


Provider ID: 232312

Provider Gender: Female

NPI: 1780935940

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP CHULA VISTA MED CTR, MERCY HOSPITAL BAKERSFIELD, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2440 FENTON ST STE 100  
CHULA VISTA, CA 91914

 Phone: (619) 656-3040  
Fax: (619) 656-3045

 After Hours Phone: (619) 656-3040


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


### **PEDIATRICS**

#### **FLORES, ERNEST**


Provider ID: 658652

Provider Gender: Male

NPI: 1043848807

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 865 3RD AVE STE 101  
CHULA VISTA, CA 91911

 Phone: (619) 426-7910  
Fax: (619) 426-2337

 After Hours Phone: (619) 426-7910


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **PEDIATRICS**


#### **FRESNO, BLANCA**

Provider ID: 102434

Provider Gender: Female

NPI: 1346258787

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 1741 EASTLAKE PKWY STE



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录






107  
 CHULA VISTA, CA 91915  
 Phone: (619) 482-1700  
 Fax: (619) 475-4578  
 After Hours Phone: (619) 482-1700  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM




### PEDIATRICS

**GARCIA, CARLOS**  
 Provider ID: 64734  
 Provider Gender: Male  
 NPI: 1417959370  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 CHULA VISTA MED CTR,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 1392 E PALOMAR ST STE  
 501  
 CHULA VISTA, CA 91913  
 Phone: (619) 271-4059

Fax: (619) 271-7451  
 After Hours Phone: (619)  
 271-4059  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH  
 8:30AM-5:30PM  
 F 8:30AM-5PM

### PEDIATRICS

**GARCIA, RAFAEL**  
 Provider ID: 360408  
 Provider Gender: Male  
 NPI: 1053414086  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish, Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 CHULA VISTA MED CTR, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 752 MEDICAL CENTER CT  
 STE 210  
 CHULA VISTA, CA 91911  
 Phone: (619) 656-0206  
 Fax: (619) 656-8936  
 After Hours Phone: (619)  
 656-0206



 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

**GHAHREMANI, SIMIN**  
 Provider ID: 634787  
 Provider Gender: Female  
 NPI: 1508904657  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SHARP CHULA VISTA  
 MED CTR, SCRIPPS MERCY  
 HOSPITAL  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 280 E ST  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 Fax: (619) 662-4196  
 After Hours Phone: (619)  
 662-4100  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

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### **PEDIATRICS**

---

#### **GHAHREMANI, SIMIN**

*Provider ID: 664445*  
*Provider Gender: Female*  
*License Number: C51110*  
*NPI: 1508904657*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Farsi*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*






 280 E ST  
CHULA VISTA, CA 91910  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\21*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*



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### **PEDIATRICS**

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#### **HOLLICK, NATALIE**

*Provider ID: 473802*  
*Provider Gender: Female*  
*NPI: 1558716845*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: Yes*  
*RADY CHILDRENS HEALTH NETWORK*  
 865 3RD AVE STE 101  
CHULA VISTA, CA 91911  
 *Phone: (619) 426-7910*  
*Fax: (619) 426-2337*  
 *After Hours Phone: (619) 426-7910*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*



*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*


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### **PEDIATRICS**

---

#### **ISAIAS, AGNELA**

*Provider ID: 664445*  
*Provider Gender: Female*  
*License Number: A82912*  
*NPI: 1790772572*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP*


*AND HEALTHCARE CTR*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 280 E ST  
CHULA VISTA, CA 91910  
 *Phone: (619) 662-4100*  
*Fax: (619) 426-2170*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\21*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

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### **PEDIATRICS**

---

#### **JACOBS-KLEISLI, MILAGROS**

*Provider ID: 467596*  
*Provider Gender: Female*  
*NPI: 1811221641*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, HUNTINGTON MEMORIAL HOSPITAL, USC Arcadia Hospital*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 769 MEDICAL CENTER CT  
STE 300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

CHULA VISTA, CA 91911  
☎ Phone: (619) 482-3090  
Fax: (619) 482-7350  
🕒 After Hours Phone: (619) 482-3090  
🌐 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **PEDIATRICS**

**KORSAND, SID**  
Provider ID: 664445  
Provider Gender: Male  
License Number: A49591  
NPI: 1588634513  
☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Farsi, Turkish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 280 E ST  
CHULA VISTA, CA 91910  
☎ Phone: (619) 662-4100  
🕒 After Hours Phone: (619) 662-4100  
🌐 Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT

PROVIDER  
🕒 Hours: M-F 8AM-5PM

### **PEDIATRICS**

**KORSAND, SID**  
Provider ID: 634788  
Provider Gender: Male  
NPI: 1588634513  
☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Farsi, Turkish  
Cultural Competency: N  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 280 E ST  
CHULA VISTA, CA 91910  
☎ Phone: (619) 662-4100  
Fax: (619) 662-4196  
🕒 After Hours Phone: (619) 662-4100  
🌐 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM

### **PEDIATRICS**

**MCMAHON, SHARON**  
Provider ID: 648721  
Provider Gender: Female  
NPI: 1487279246  
☑ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 865 THIRD AVESTE 101  
CHULA VISTA, CA 91911  
☎ Phone: (619) 426-7910  
Fax: (619) 426-2337  
🕒 After Hours Phone: (619) 426-7910  
🌐 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-0PM



### **PEDIATRICS**

**MISTRY, CHETAN**  
Provider ID: 86439  
Provider Gender: Male  
NPI: 1467505834  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MERCY  
HOSPITAL  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录




 2440 FENTON ST STE 100  
CHULA VISTA, CA 91914  
 Phone: (619) 656-3040  
Fax: (619) 656-3045  
 After Hours Phone: (619)  
656-3040  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19



American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **MOSQUERA, DIANA**


Provider ID: 371232  
Provider Gender: Female  
NPI: 1144238098  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK







 769 MEDICAL CENTER CT  
STE 300  
CHULA VISTA, CA 91911  
 Phone: (619) 482-3090  
Fax: (619) 482-7350  
 After Hours Phone: (619)  
482-3090  
 Website: N/A  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **MOSQUERA, DIANA**



Provider ID: 463001  
Provider Gender: Female  
NPI: 1144238098  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK







 865 3RD AVE STE 101  
CHULA VISTA, CA 91911  
 Phone: (619) 426-7910  
 After Hours Phone: (619)  
426-7910  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **NGUYEN, TRUC**


Provider ID: 78518

Provider Gender: Female  
NPI: 1881884054  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SHARP CHULA VISTA  
MED CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO,  
WASHINGTON HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2440 FENTON ST STE 100  
CHULA VISTA, CA 91914  
 Phone: (619) 656-3040  
Fax: (619) 656-3045  
 After Hours Phone: (619)  
656-3040  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS


#### **OIRA, VICTORIA**



Provider ID: 73140  
Provider Gender: Female  
NPI: 1134172448  
 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录

 *Provider Language(s)*  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 890 EASTLAKE PKWY STE  
203  
CHULA VISTA, CA 91914  
 Phone: (619) 656-3020  
Fax: (619) 656-3019  
 After Hours Phone: (619)  
370-6661  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-4:30PM

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### PEDIATRICS

#### PIANSAY, MARIA CORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

 *Provider English Spoken:* Y

 *Provider Language(s)*  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### PEDIATRICS

#### ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female


License Number: A92037


NPI: 1992876759


 *Provider English Spoken:* Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 280 E ST  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

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### PEDIATRICS

#### SALAZAR, JUANITA


Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

 *Provider English Spoken:* Y

 *Provider Language(s)*  
Spoken: Spanish, Tagalog,  
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<b>PEDIATRICS</b>		<b>PEDIATRICS</b>	
<b>SANTIAGO, ROXANE</b> Provider ID: 269279 Provider Gender: Female NPI: 1033461801 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 865 3RD AVE STE 101 CHULA VISTA, CA 91911 Phone: (619) 426-7910 Fax: (619) 426-2337 After Hours Phone: (619) 426-7910 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM		<b>SHETH, HASMUKH</b> Provider ID: 427322 Provider Gender: Male License Number: A45942 NPI: 1396812236 Provider English Spoken: Y Provider Language(s) Spoken: Gujarati, Hindi, Urdu Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 678 3RD AVE CHULA VISTA, CA 91910 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 Website: www.syhealth.org /clinics/chula- vista- medic al- plaza Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	
<b>PEDIATRICS</b>		<b>PEDIATRICS</b>	
<b>YAO, CATHERINE</b> Provider ID: 371204 Provider Gender: Female NPI: 1801166442 Provider English Spoken: Y Cultural Competency: N		<b>VALENCIA, MARILES</b> Provider ID: 104059 Provider Gender: Female NPI: 1275541625 Provider English Spoken: Y	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

769 MEDICAL CENTER CT  
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)  
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **ZARGAR, SHABNAM**

Provider ID: 371075

Provider Gender: Female

NPI: 1417256074

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, DESERT

REGIONAL MED CTR, JOHN F

KENNEDY MEMORIAL HOSP,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

769 MEDICAL CENTER CT  
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)  
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **BALDONADO, ANALICIA**

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)

515-2325

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **INDA, PRISCILLA**

Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Russian,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
Hours: M-F 8AM-5PM

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### PHYSICIANS ASSISTANT

---

#### MELENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

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### PHYSICIANS ASSISTANT

---

#### QUICK, ELISABETH

Provider ID: 206355

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

251 LANDIS AVE  
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)  
515-2500

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

---

### PHYSICIANS ASSISTANT

---

#### REVELES, DIANA

Provider ID: 417641

Provider Gender: Female

License Number: PA19306

NPI: 1548455405

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

352 L ST  
CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)  
515-2325

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

---

### PODIATRIST

---

#### MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

---

### PODIATRIST

---

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819


NPI: 1326282237


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### REGISTERED PHYSICAL THERAPIST

#### AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189


NPI: 1437445566


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### REGISTERED PHYSICAL THERAPIST


#### CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

### REGISTERED PHYSICAL THERAPIST

#### GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### REGISTERED PHYSICAL THERAPIST

#### GONZALES, MICHELLE

Provider ID: 206355


Provider Gender: Female

License Number: PT291706

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1548714652

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---


#### **MIGNEA, DAVID**

Provider ID: 206355

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)

515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---


#### **RODRIGUEZ, CASSANDRA**

Provider ID: 206355

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### **RHEUMATOLOGY**

---

#### **REDDY, DANA**

Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/  
/clinics/chula-  
vista-  
medic-  
al-  
plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **SPEECH PATHOLOGIST**

---

#### **CABADING, DOREEN**

Provider ID: 427322

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



License Number: SP18192


NPI: 1043507585

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### EL CAJON

#### CERTIFIED NURSE PRACTITIONER

##### **BELEN, NEZER**

Provider ID: 418340

Provider Gender: Male

License Number: NP95009292



NPI: 1386120723

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### CERTIFIED NURSE PRACTITIONER

##### **DRISCOLL, SUSAN**

Provider ID: 569910

Provider Gender: Female

License Number: NP95012943

NPI: 1477755684



 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

#### CERTIFIED NURSE PRACTITIONER

##### **GARCIA, JOHNNY**

Provider ID: 418340

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156



 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020


 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### CERTIFIED NURSE PRACTITIONER

##### **HAMID, WAHIDA**

Provider ID: 569910

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: NP95001707  
NPI: 1164812293

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **HARPEL, SHERYL**

Provider ID: 569910  
Provider Gender: Female  
License Number: NP95009329  
NPI: 1780177147

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

Website: www.syhealth.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **JENSEN, ADRIENNE**

Provider ID: 569910  
Provider Gender: Female  
License Number: NP95023148  
NPI: 1184389934

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE

### PRACTITIONER

#### **KELLOGG, KRISTEN**

Provider ID: 418340  
Provider Gender: Female  
License Number: NP95009180  
NPI: 1649757741

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **LU, TAMMY**

Provider ID: 206354  
Provider Gender: Female  
License Number: NP95007253  
NPI: 1457879132



Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### SAN DIEGO

 1111 W CHASE AVE  
EL CAJON, CA 92020  
 Phone: (619) 515-2499  
 After Hours Phone: (619)  
515-2499

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


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#### **CERTIFIED NURSE** **PRACTITIONER**


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### OCHOA, ERLINDA

Provider ID: 185267  
Provider Gender: Female  
License Number: NP4430  
NPI: 1346437464

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)  
312-0347


 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

### PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM


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#### **CERTIFIED NURSE** **PRACTITIONER**


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### OCHOA, ERLINDA

Provider ID: 418501  
Provider Gender: Female  
License Number: NP4430  
NPI: 1346437464

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 1032 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 795-5991  
 After Hours Phone: (619)  
795-5991

 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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#### **CERTIFIED NURSE** **PRACTITIONER**

---

### ODA, THAGHAR


Provider ID: 418340  
Provider Gender: Female  
License Number: NP95000205

NPI: 1063835692

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



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#### **CERTIFIED NURSE** **PRACTITIONER**

---

### ODA, THAGHAR

Provider ID: 418340  
Provider Gender: Female  
License Number: RN810863  
NPI: 1063835692



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Phone: (619) 515-2498  
 After Hours Phone: (619) 515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER



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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **OLVERA, LUISA**



Provider ID: 478971  
Provider Gender: Female  
License Number: NP95001710  
NPI: 1598161309


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR



Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION

 133 W MAIN ST STE 100  
EL CAJON, CA 92020

 Phone: (619) 401-0404  
 After Hours Phone: (619) 401-0404

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: SU-SA 8AM-8PM

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **REAL, MARIA**



Provider ID: 185267  
Provider Gender: Female  
License Number: NP17328  
NPI: 1548450471


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC


 165 S 1ST ST  
EL CAJON, CA 92019

 Phone: (619) 312-0347  
 After Hours Phone: (619) 312-0347

 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

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### **CERTIFIED NURSE** **PRACTITIONER**


---



#### **REGEV, SHANEE**


Provider ID: 569910  
Provider Gender: Female  
License Number: NP95022460  
NPI: 1477218121

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **REID, EMILY**

Provider ID: 185267  
Provider Gender: Female  
License Number: NP95002766  
NPI: 1083081467

 Provider English Spoken: Y  
Cultural Competency: N




Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019








 Phone: (619) 312-0347  
 After Hours Phone: (619)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录








312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### CERTIFIED NURSE PRACTITIONER

**SMITH, SHARON**  
 Provider ID: 418340  
 Provider Gender: Female  
 License Number: RN428876  
 NPI: 1780603597  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF SAN DIEGO  
 525 E MAIN ST  
 EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619) 515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT









PROVIDER

### CERTIFIED NURSE PRACTITIONER



**SMITH, SHARON**  
 Provider ID: 418340  
 Provider Gender: Female  
 License Number: NP15444  
 NPI: 1780603597  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF SAN DIEGO  
 525 E MAIN ST  
 EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619) 515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER

**VERDUZCO GONZALEZ, AURORA**  
 Provider ID: 185267  
 Provider Gender: Female  
 License Number: NP95001961  
 NPI: 1932452323




 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
 EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619) 312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### CERTIFIED NURSE PRACTITIONER








**VILLANUEVA DE GUTIE, BERENICE**  
 Provider ID: 185267  
 Provider Gender: Female  
 License Number: NP95002188  
 NPI: 1952795536  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
 EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **CERTIFIED NURSE PRACTITIONER**



**WILLIAMS, TAKISHA**  
Provider ID: 418340  
Provider Gender: Female  
License Number: NP95013978  
NPI: 1881727386  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAUNA**  
Provider ID: 185267  
Provider Gender: Female  
License Number: NP95001840  
NPI: 1063884864  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)  
312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **CERTIFIED REGISTERED NURSE MIDWIFE**

**CORRY, ANDREA**  
Provider ID: 418340  
Provider Gender: Female  
License Number: NM1721  
NPI: 1255489571

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **CHIROPRACTOR**

**HOURIHAN, KEITH**  
Provider ID: 418501  
Provider Gender: Male  
License Number: DC29314  
NPI: 1306916994  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 1032 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 795-5983  
 After Hours Phone: (619)  
795-5983  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:30AM-5:30PM

### CHIROPRACTOR

#### **SOSA, DAVID**

Provider ID: 418340  
Provider Gender: Male  
License Number: DC33150  
NPI: 1013308675  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (619) 515-2498  
After Hours Phone: (619) 515-2498  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### CHIROPRACTOR

#### **SOSA, DAVID**

Provider ID: 206354  
Provider Gender: Male  
License Number: DC33150  
NPI: 1013308675

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE  
EL CAJON, CA 92020  
Phone: (619) 515-2499  
After Hours Phone: (619) 515-2499  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### CHIROPRACTOR

#### **UY, ASHLEY**

Provider ID: 418340  
Provider Gender: Female  
License Number: DC33869  
NPI: 1174059760  
Provider English Spoken: Y  
Provider Language(s) Spoken: Chinese  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (619) 515-2498  
After Hours Phone: (619) 515-2498  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### ENDOCRINOLOGY

### METABOLISM DIABETES

#### **ISLAM, JULIE**

Provider ID: 418340  
Provider Gender: Female  
License Number: A149552  
NPI: 1750780516  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (616) 515-2498  
After Hours Phone: (616) 515-2498  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### ENDOCRINOLOGY

### METABOLISM DIABETES

#### **NAGELBERG, JODI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 418340

Provider Gender: Female


License Number: A146838


NPI: 1720474141

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **FAMILY PRACTICE**

#### **AL ANI, NAJWAN**

Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

Provider English Spoken: Y


Provider Language(s)  
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **FAMILY PRACTICE**

#### **ALGHAMDI, ASMA**

Provider ID: 569910

Provider Gender: Female

License Number: A167529

NPI: 1316310840


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **BRUHN, JOSHUA**

Provider ID: 418340

Provider Gender: Male


License Number: A186694


NPI: 1447888284

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### **FAMILY PRACTICE**

#### **CORMAN, DANIEL**

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

**DOMINGUEZ, DENNIS**

Provider ID: 569910

Provider Gender: Male

License Number: G43179

NPI: 1225063811

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

**GHAFFARI, DAUOD**

Provider ID: 478971

Provider Gender: Male

License Number: A98486

NPI: 1053417691

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDATION

133 W MAIN ST STE 100  
EL CAJON, CA 92020

Phone: (619) 401-0404

After Hours Phone: (619)  
401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

**GHAFFARI, DAUOD**

Provider ID: 676088

Provider Gender: Male

NPI: 1053417691

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

855 E MADISON AVE  
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)  
440-2751

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

**GORDON, CHRISTOPHER**

Provider ID: 418340

Provider Gender: Male

License Number: A83390

NPI: 1477711521

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

☎ After Hours Phone: (619) 515-2498

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F  
8:30AM-5:30PM

---

### FAMILY PRACTICE

#### HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female

License Number: A110192

NPI: 1861648461

☑ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 1111 W CHASE AVE  
EL CAJON, CA 92020

☎ Phone: (619) 515-2499

☎ After Hours Phone: (619) 515-2499

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

---

### FAMILY PRACTICE

#### HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male

License Number: A177445

NPI: 1922619766

☑ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 525 E MAIN ST  
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

☎ After Hours Phone: (619) 515-2498

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

---

### FAMILY PRACTICE

#### KASAWA, JOHN

Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

☑ Provider English Spoken: Y  
☑ Provider Language(s)

Spoken: Arabic, Chaldean  
Neo-Aramaic, Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 875 EL CAJON BLVD  
EL CAJON, CA 92020

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

---

### FAMILY PRACTICE

#### NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

☑ Provider English Spoken: Y  
☑ Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 875 EL CAJON BLVD  
EL CAJON, CA 92020

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

---

### FAMILY PRACTICE

---

#### **PUTRUS, RAMIZ**

Provider ID: 185267

Provider Gender: Male


License Number: A68184


NPI: 1144300534

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)  
312-0347

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### FAMILY PRACTICE

---

#### **RONQUILLO, KAREN AN**

Provider ID: 658684


Provider Gender: Female

NPI: 1275160012

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 855 E MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)  
440-2751


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

---

### FAMILY PRACTICE

---

#### **SALEM, RAMSEY**

Provider ID: 569910

Provider Gender: Male


License Number: A158364


NPI: 1245401298

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### FAMILY PRACTICE

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#### **SCHUMAKER, EDWARD**

Provider ID: 418501

Provider Gender: Male

License Number: 20A6433


NPI: 1184616872


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 1032 BROADWAY  
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)  
795-5991


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

---

### FAMILY PRACTICE

---

#### **SCHUMAKER, EDWARD**

Provider ID: 185267



Provider Gender: Male

License Number: 20A6433






NPI: 1184616872

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 Provider English Spoken: Y N  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC



 165 S 1ST ST  
 EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619) 312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### FQHC

**CENTRO MEDICO EL CAJON,**


Provider ID: 478971  
 NPI: 1154480069  
 Provider English Spoken: Y  
 Cultural Competency: N  
**BORREGO COMMUNITY HEALTH FOUNDTION**



 133 W MAIN ST STE 100  
 EL CAJON, CA 92020  
 Phone: (619) 873-8940  
 Fax: (619) 401-0522  
 After Hours Phone: (619) 873-8940  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER  
 Hours: SU 8AM-8PM  
 M-F 8AM-8PM



### FQHC

**CHASE AVENUE FAMILY HEALTH CTRS INC,**

Provider ID: 206354  
 NPI: 1104861681  
 Provider English Spoken: Y  
 Cultural Competency: N  
**FAMILY HEALTH CENTERS OF SAN DIEGO**


 1111 W CHASE AVE  
 EL CAJON, CA 92020  
 Phone: (619) 515-2499  
 Fax: (619) 593-7164

 After Hours Phone: (619) 515-2499



 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### FQHC


**FAMILY HLTH CTR SAN DIEGO-EL CAJON,**

Provider ID: 418340  
 NPI: 1932561198  
 Provider English Spoken: Y  
 Cultural Competency: N  
**FAMILY HEALTH CENTERS OF**

SAN DIEGO

 525 E MAIN ST  
 EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 Fax: (619) 269-0191




 After Hours Phone: (619) 515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):


N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM  
 SA 8:30AM-5:30PM

### FQHC

**LA MAESTRA CHC EL CAJON BROADWAY,**



Provider ID: 418501  
 NPI: 1134590086  
 Provider English Spoken: Y  
 Cultural Competency: N  
**LA MAESTRA FAMILY CLINIC**  
 1032 BROADWAY  
 EL CAJON, CA 92021  
 Phone: (619) 795-5991  
 Fax: (619) 795-5992

 After Hours Phone: (619) 795-5991

 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5:30PM*

---

### FQHC

---

#### LA MAESTRA FAMILY CLINIC INC,


*Provider ID: 185267*

*NPI: 1336353721*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019

 *Phone: (619) 312-0347*

*Fax: (619) 749-5480*

 *After Hours Phone: (619) 312-0347*


 *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TU 8AM-5PM TH-F 8AM-5PM*

---

### FQHC

---

#### SAN YSIDRO HEALTH EL CAJON,


*Provider ID: 569910*

*NPI: 1568845741*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

*Fax: (619) 785-3356*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### HEPATOLOGY

---


#### GISH, ROBERT


*Provider ID: 185267*

*Provider Gender: Male*

*License Number: G45632*

*NPI: 1548281322*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: LOMA*


LINDA UNIVERSITY COMM


MED CTR

*Board Certified Specialty: No*

LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019

 *Phone: (619) 312-0347*

 *After Hours Phone: (619) 312-0347*


 *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

---

### INTERNAL MEDICINE

---

#### AL-TAMEEMI, AHMED

*Provider ID: 478971*

*Provider Gender: Male*

*License Number: A151547*


*NPI: 1134513211*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*

BORREGO COMMUNITY HEALTH FOUNDATION

 133 W MAIN ST STE 100  
EL CAJON, CA 92020

 *Phone: (619) 401-0404*

 *After Hours Phone: (619) 401-0404*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### INTERNAL MEDICINE

---

#### AWDISHO, ALAN

*Provider ID: 569910*


*Provider Gender: Male*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 20A18702

NPI: 1164795498

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Assyrian, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **CARPENTER III, ROBERT**

Provider ID: 569910

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE


#### **DUONG, MAI**

Provider ID: 418340

Provider Gender: Female

License Number: A127798

NPI: 1629339304

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE

#### **GORGES, RANDA**

Provider ID: 418340

Provider Gender: Female

License Number: A138815

NPI: 1285079509

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE

#### **JABRI, ZAIN**


Provider ID: 418501

Provider Gender: Male

License Number: A160760

NPI: 1891159620

 Provider English Spoken: Y

 Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录

*Spoken: Arabic*  
*Cultural Competency: N*  
*Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Board Certified Specialty: No*  
*LA MAESTRA FAMILY CLINIC*  
 1032 BROADWAY  
EL CAJON, CA 92021  
 *Phone: (619) 795-5991*  
 *After Hours Phone: (619) 795-5991*  
 *Website: www.lamaestra.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5:30PM*

### **INTERNAL MEDICINE**






#### **MANSY, TAMARA**



*Provider ID: 569910*  
*Provider Gender: Female*  
*License Number: A164238*

*NPI: 1396277737*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**









#### **MAY, LOUIS**

*Provider ID: 569910*  
*Provider Gender: Male*  
*License Number: A138568*  
*NPI: 1720497514*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: EISENHOWER MEDICAL CTR*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

#### **MICHAEL, RAMI**

*Provider ID: 569910*  
*Provider Gender: Male*  
*License Number: A144513*  
*NPI: 1467871673*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **INTERNAL MEDICINE**

#### **NADI, FAHIMA**

Provider ID: 418340

Provider Gender: Female

License Number: A175325

NPI: 1770072290

Provider English Spoken: Y

Provider Language(s)  
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **INTERNAL MEDICINE**

#### **NARAYAN, ARCHANA**

Provider ID: 569910

Provider Gender: Female

License Number: A101773

NPI: 1003053950

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Kannada

Cultural Competency: N


Hospital Affiliation: PALOMAR  
MEDICAL CENTER


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **INTERNAL MEDICINE**

#### **PARIKH, MILIND**

Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y

Provider Language(s)  
Spoken: Gujarati, Hindi,  
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, Adventist


Health and Rideout


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **INTERNAL MEDICINE**

#### **PETTIT, JOHN**

Provider ID: 478971

Provider Gender: Male

License Number: G52812

NPI: 1497992432

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)  
401-0404

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p><b>INTERNAL MEDICINE</b></p> <p><b>REDDY, ARJUN</b>            Provider ID: 428134            Provider Gender: Male            NPI: 1730132457</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Spanish            Cultural Competency: N            Hospital Affiliation: GROSSMONT HOSPITAL            Board Certified Specialty: No            COMMUNITY CARE IPA LLC</p> <p> 5442 SYCUAN RD            EL CAJON, CA 92019   Phone: (619) 445-0707            Fax: (619) 445-0988   After Hours Phone: (619) 445-0707   Website: N/A            Medi-Cal Open Panel: Yes            Min/Max Age: 18\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-4PM</p>	<p><i>Syriac</i>            Cultural Competency: N            Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL            Board Certified Specialty: No            IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD</p> <p> 860 JAMACHA RD STE 107            EL CAJON, CA 92019   Phone: (619) 456-9920            Fax: (619) 456-9340   After Hours Phone: (619) 456-9920   Website: N/A            Medi-Cal Open Panel: Yes            Min/Max Age: 18\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-7PM</p>	<p><b>SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL</b>            Board Certified Specialty: No            LA MAESTRA FAMILY CLINIC</p> <p> 165 S 1ST ST            EL CAJON, CA 92019   Phone: (619) 269-1262   After Hours Phone: (619) 269-1262   Website: www.lamaestra.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-TU 8AM-5PM            TH-F 8AM-5PM</p>
<p><b>INTERNAL MEDICINE</b></p> <p><b>ROUEL, LINDA</b>            Provider ID: 308485            Provider Gender: Female            NPI: 1326128950</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Arabic, Mandarin,</p>	<p><b>INTERNAL MEDICINE</b></p> <p><b>ROUEL, WADI</b>            Provider ID: 185267            Provider Gender: Male            License Number: C55979            NPI: 1740254713</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Arabic, Spanish, Syriac            Cultural Competency: N            Hospital Affiliation: SHARP MEMORIAL HOSPITAL,</p>	<p><b>INTERNAL MEDICINE</b></p> <p><b>ROUEL, WADI</b>            Provider ID: 418501            Provider Gender: Male            License Number: C55979            NPI: 1740254713</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Arabic, Spanish, Syriac            Cultural Competency: N            Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

1032 BROADWAY  
EL CAJON, CA 92021

Phone: (619) 795-5983

After Hours Phone: (619)  
795-5983

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE

**SHEIKH-MOHAMED, HALA**

Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

**TCHAKMAKJIAN, LEVON**

Provider ID: 569910

Provider Gender: Male

License Number: C144411

NPI: 1790744795

Provider English Spoken: Y

Provider Language(s)  
Spoken: Armenian, Hebrew

Cultural Competency: N

Hospital Affiliation: NORTH  
BAY VACAVALLEY HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

**ZAYED, AHMAD**

Provider ID: 478971

Provider Gender: Male

License Number: A169713

NPI: 1720500929

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Chinese,  
Mandarin, Persian, Tagalog

Cultural Competency: N

Hospital Affiliation: RIVERSIDE  
COMMUNITY HOSP

Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION

133 W MAIN ST STE 100  
EL CAJON, CA 92020

Phone: (619) 401-0404

After Hours Phone: (619)  
401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU-SA 8AM-8PM

### INTERVENTIONAL

#### CARDIOLOGY

**KAFRI, HASSAN**

Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, French,



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录



German, Russian, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, GROSSMONT  
 HOSPITAL, SHARP MEMORIAL  
 HOSPITAL, SHARP CHULA  
 VISTA MED CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
 EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER







### INTERVENTIONAL CARDIOLOGY

**MOUSSAVIAN, MEHRAN**  
 Provider ID: 418340  
 Provider Gender: Male  
 License Number: 20A7241  
 NPI: 1689788234  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 CHULA VISTA MED CTR, TRI



CITY MEDICAL CTR, SHARP  
 MEMORIAL HOSPITAL,  
 ALVARADO HOSPITAL LLC,  
 GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MEMORIAL HOSPITAL,  
 Adventist Health and Rideout  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 525 E MAIN ST  
 EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
 515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### OBSTETRICS / GYNECOLOGY

**ALIMONOS, LYSISTRATI**  
 Provider ID: 418340  
 Provider Gender: Female  
 License Number: 20A14919  
 NPI: 1619397031  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N

Hospital Affiliation:  
 GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 525 E MAIN ST  
 EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
 515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM

### OBSTETRICS / GYNECOLOGY

**BUECHNER, CHARLENE**  
 Provider ID: 418340  
 Provider Gender: Female  
 License Number: A68463  
 NPI: 1376663831  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SHARP MARY  
 BIRCH HOSP FOR WOMEN

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### AND NEWBORNS

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BULLOCH, EDGAR**

Provider ID: 478971

Provider Gender: Male

License Number: A113241

NPI: 1508046376

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

BORREGO COMMUNITY  
HEALTH FOUNDTION

133 W MAIN ST STE 100  
EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)

873-8940

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F

8:30AM-5:30PM






### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 418340  
Provider Gender: Male  
License Number: A108228  
NPI: 1629277322  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO





 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER



### **OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**  
Provider ID: 418340  
Provider Gender: Female  
License Number: A178499  
NPI: 1033613732  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO  
 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**  
Provider ID: 418340  
Provider Gender: Female  
License Number: C174771  
NPI: 1053392035  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

**HO, MYLIEN**  
Provider ID: 478971  
Provider Gender: Female  
License Number: A48215  
NPI: 1851464606  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL  
Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION  
 133 W MAIN ST STE 100  
EL CAJON, CA 92020  
 Phone: (619) 873-8940  
 After Hours Phone: (619)  
873-8940  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


### **KHAN, ALIYA**

Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hindi, Urdu


Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 1032 BROADWAY  
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)  
795-5991

 Website: [www.lamaestra.org](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 8AM-2PM

### **OBSTETRICS / GYNECOLOGY**


#### **LIPSCHITZ, LISA**

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CORONADO HOSP AND  
HEALTHCARE CTR, SCRIPPS  
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **LOEFFLER, ALLISON**

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N



Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL

#### **CHULA VISTA**

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **MENDEZ, DIEGO**

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY  
GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

SCRIPPS MERCY HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL, KERN  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **PAPA, RHETT**

Provider ID: 478971

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

133 W MAIN ST STE 100  
EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)  
873-8940

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 418340

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**

Provider ID: 418340

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

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## C. 初级保健目录

Provider ID: 418340  
Provider Gender: Female  
License Number: 20A13958  
NPI: 1932269198  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
📍 525 E MAIN ST  
EL CAJON, CA 92020  
☎ Phone: (619) 515-2498  
📞 After Hours Phone: (619)  
515-2498  
🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

Provider ID: 418340  
Provider Gender: Female  
License Number: 20A11535  
NPI: 1811162456  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR,  
GROSSMONT HOSPITAL,  
DESERT REGIONAL MED CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
📍 525 E MAIN ST  
EL CAJON, CA 92020  
☎ Phone: (619) 515-2498  
📞 After Hours Phone: (619)  
515-2498  
🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

Provider ID: 418340  
Provider Gender: Male  
License Number: G78814  
NPI: 1699790634  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP

AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
📍 525 E MAIN ST  
EL CAJON, CA 92020  
☎ Phone: (619) 515-2498  
📞 After Hours Phone: (619)  
515-2498  
🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM


### **OPHTHALMOLOGY**



#### **ALBORZIAN, SHERVIN**

Provider ID: 418340  
Provider Gender: Male  
License Number: A107093  
NPI: 1588825129  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
📍 525 E MAIN ST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619) 515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM  
 SA 8:30AM-5:30PM

### **OPHTHALMOLOGY**









#### **JARDON, JAVIER**

Provider ID: 569910  
 Provider Gender: Male  
 License Number: A131365  
 NPI: 1609171982  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation:  
 CALIFORNIA HOSP MED CTR  
 LOS ANGELES, EL CENTRO  
 REGIONAL MEDICAL CENTER  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
 EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER



### **OPHTHALMOLOGY**





#### **MANI, NASRIN**

Provider ID: 569910  
 Provider Gender: Female  
 License Number: A40473  
 NPI: 1023061314  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Arabic, Faroese,  
 Farsi, Persian, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL, SHARP  
 MEMORIAL HOSPITAL, UCSD  
 MEDICAL CTR, SHARP CHULA  
 VISTA MED CTR, GROSSMONT  
 HOSPITAL  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
 EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **OPHTHALMOLOGY**


#### **PAPASTERGIU, GEORGIOS**

Provider ID: 569910  
 Provider Gender: Male  
 License Number: A127706  
 NPI: 1790054393  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Arabic, Farsi,  
 French, Greek, Italian,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: EL  
 CENTRO REGIONAL MEDICAL  
 CENTER, SCRIPPS MEMORIAL  
 HOSPITAL, SHARP MEMORIAL  
 HOSPITAL  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
 EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM








### **OPHTHALMOLOGY**

#### **PONS, MAURICIO**

Provider ID: 569910



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## C. 初级保健目录

Provider Gender: Male  
License Number: A87650  
NPI: 1376723759  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, EL  
CENTRO REGIONAL MEDICAL  
CENTER, SHARP MEMORIAL  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### OPHTHALMOLOGY

#### SKAF, AYHAM



Provider ID: 569910  
Provider Gender: Male  
License Number: A120584  
NPI: 1285888628  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Spanish

Cultural Competency: N  
Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### ADJAN, ROULA

Provider ID: 185267  
Provider Gender: Female  
License Number: A81682  
NPI: 1992847263  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 280-4213  
 After Hours Phone: (619)

280-4213  
 Website: www.lamaestra.or  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

























#### CONE, STEPHANIE

Provider ID: 185267  
Provider Gender: Female  
License Number: A123929  
NPI: 1437444858  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)  
312-0347  
 Website: www.lamaestra.or  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

<p>N   <i>Accessibility: CONTACT PROVIDER</i></p>	<hr/> <b>PEDIATRICS</b> <hr/>	<i>Hospital Affiliation: SCRIPPS</i>
<hr/> <b>PEDIATRICS</b> <hr/>	<b>FIGUEROA RODRIGUEZ, BRENDA</b>	<b>MERCY HOSPITAL</b>
<b>CONE, STEPHANIE</b> <i>Provider ID: 418501</i>	<i>Provider ID: 478971</i>	<i>Board Certified Specialty: No</i> <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>
<i>Provider Gender: Female</i>	<i>Provider Gender: Female</i>	 525 E MAIN ST
<i>License Number: A123929</i>	<i>License Number: A114674</i>	EL CAJON, CA 92020
<i>NPI: 1437444858</i>	<i>NPI: 1134205214</i>	 <i>Phone: (619) 515-2498</i>
 <i>Provider English Spoken: Y</i>	 <i>Provider English Spoken: Y</i>	 <i>After Hours Phone: (619) 515-2498</i>
 <i>Provider Language(s) Spoken: Spanish</i>	 <i>Provider Language(s) Spoken: Spanish</i>	 <i>Website: www.fhcsd.org</i>
<i>Cultural Competency: N</i>	<i>Cultural Competency: N</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>Hospital Affiliation: SCRIPPS</i>	<i>Hospital Affiliation: Sharp</i>	<i>Min/Max Age: 0\None</i>
<b>MERCY HOSPITAL, SCRIPPS</b>	<b>Grossmont Hospital</b>	<i>American Sign Language (ASL):</i>
<b>MERCY HOSPITAL CHULA</b>	<b>Board Certified Specialty: No</b>	<b>N</b>
<b>VISTA, RADY CHILDRENS</b>	<b>BORREGO COMMUNITY</b>	 <i>Accessibility: CONTACT</i>
<b>HOSPITAL SAN DIEGO</b>	<b>HEALTH FOUNDTION</b>	 <i>Hours: M-F</i>
<i>Board Certified Specialty: No</i>	 133 W MAIN ST STE 100	<b>8:30AM-5:30PM</b>
<b>LA MAESTRA FAMILY CLINIC</b>	 <i>Phone: (619) 873-8940</i>	<hr/> <b>PEDIATRICS</b> <hr/>
 1032 BROADWAY	 <i>After Hours Phone: (619) 873-8940</i>	<b>HOANG, VY</b>
 <i>Phone: (619) 795-5991</i>	 <i>Website: N/A</i>	<i>Provider ID: 546310</i>
 <i>After Hours Phone: (619) 795-5991</i>	<i>Medi-Cal Open Panel: Yes</i>	<i>Provider Gender: Female</i>
 <i>Website: www.lamaestra.org</i>	<i>Min/Max Age: 0\None</i>	<i>NPI: 1649575135</i>
<i>Medi-Cal Open Panel: Yes</i>	<i>American Sign Language (ASL):</i>	 <i>Provider English Spoken: Y</i>
<i>Min/Max Age: 0\None</i>	<b>N</b>	<i>Cultural Competency: N</i>
<i>American Sign Language (ASL):</i>	 <i>Accessibility: CONTACT</i>	<i>Hospital Affiliation:</i>
<b>N</b>	<b>PROVIDER</b>	<b>GROSSMONT HOSPITAL,</b>
 <i>Accessibility: CONTACT</i>	<hr/> <b>PEDIATRICS</b> <hr/>	<b>SHARP MARY BIRCH HOSP</b>
 <i>Hours: M-F</i>	<b>FLEMING, TARA</b>	<b>FOR WOMEN AND</b>
<b>8:30AM-5:30PM</b>	<i>Provider ID: 418340</i>	<b>NEWBORNS, RADY</b>
	<i>Provider Gender: Female</i>	<b>CHILDRENS HOSPITAL SAN</b>
	<i>License Number: A152462</i>	<b>DIEGO</b>
	<i>NPI: 1972965242</i>	<i>Board Certified Specialty: No</i>
	 <i>Provider English Spoken: Y</i>	<b>RADY CHILDRENS HEALTH</b>
	<i>Cultural Competency: N</i>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### NETWORK

844 JACKMAN ST  
EL CAJON, CA 92020  
Phone: (619) 442-2560  
Fax: (619) 442-7836  
After Hours Phone: (619)  
442-2560  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### PEDIATRICS

#### JACKSON, DANA

Provider ID: 418340  
Provider Gender: Female  
License Number: 20A14119  
NPI: 1689060063  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Portuguese,  
Spanish  
Cultural Competency: N  
Hospital Affiliation:  
MARINHEALTH AND  
MARINHEALTH MEDICAL  
CENTER, SCRIPPS MERCY  
HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498  
After Hours Phone: (619)  
515-2498

Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### JONES, SETAREH

Provider ID: 418501  
Provider Gender: Female  
License Number: A110010  
NPI: 1033441316  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

1032 BROADWAY  
EL CAJON, CA 92021  
Phone: (619) 795-5983  
After Hours Phone: (619)  
795-5983  
Website: www.lamaestra.or  
g

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### PEDIATRICS

#### JONES, SETAREH

Provider ID: 185267  
Provider Gender: Female  
License Number: A110010  
NPI: 1033441316  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

165 S 1ST ST  
EL CAJON, CA 92019  
Phone: (619) 312-0347  
After Hours Phone: (619)  
312-0347  
Website: www.lamaestra.or  
g  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### PEDIATRICS


#### KODSI, ALICIA

Provider ID: 418340  
Provider Gender: Female  
License Number: A147976


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


NPI: 1932514353

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498


 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **PEDIATRICS**

#### **NAGNUR, PRITI**


Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929


 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi, Kannada


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1111 W CHASE AVE  
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)  
515-2499

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


### **PEDIATRICS**


#### **NAIK, SHILPA**

Provider ID: 546498

Provider Gender: Female

NPI: 1902156904

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, Sharp Grossmont  
Hospital

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 844 JACKMAN ST  
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)  
442-2560

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **NGUYEN, VI**

Provider ID: 546509

Provider Gender: Female


NPI: 1053540534

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 844 JACKMAN ST  
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)  
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**



#### **PINTO, ANITA**

Provider ID: 546215

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female  
NPI: 1477663722

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 844 JACKMAN ST  
EL CAJON, CA 92020

 Phone: (619) 442-2560  
Fax: (619) 442-7836


 After Hours Phone: (619)  
442-2560


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

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### **PEDIATRICS**

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#### **RODRIGUEZ, ALDO**


Provider ID: 569910

Provider Gender: Male

License Number: A134995

NPI: 1508209651

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Portuguese,  
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

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### **PHYSICIANS ASSISTANT**

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#### **ALYAS, ALISIA**

Provider ID: 418501

Provider Gender: Female


License Number: PA58466


NPI: 1437768017


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 1032 BROADWAY  
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)  
795-5991


 Website: www.lamaestra.or  
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### **PHYSICIANS ASSISTANT**

---

#### **ALYAS, ALISIA**

Provider ID: 185267

Provider Gender: Female


License Number: PA58466


NPI: 1437768017


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)  
312-0347

 Website: www.lamaestra.or  
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **PHYSICIANS ASSISTANT**

---

#### **ARMENTA, JORGE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

Provider ID: 185267  
Provider Gender: Male  
License Number: PA13694  
NPI: 1346382611  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619) 312-0347  
 Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### PHYSICIANS ASSISTANT




#### MERCER, KELLY



Provider ID: 185267  
Provider Gender: Female  
License Number: PA21625  
NPI: 1154609790  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST

EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619) 312-0347  
 Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### PHYSICIANS ASSISTANT


#### MERCER, KELLY







Provider ID: 418501  
Provider Gender: Female  
License Number: PA21625  
NPI: 1154609790  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 1032 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 795-5991  
 After Hours Phone: (619) 795-5991  
 Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

### PHYSICIANS ASSISTANT

#### ROSENBLATT, SHERILYN

Provider ID: 569910  
Provider Gender: Female  
License Number: PA22872  
NPI: 1114041621  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM


### PHYSICIANS ASSISTANT





#### TURNER, SHEREENA



Provider ID: 418340  
Provider Gender: Female  
License Number: PA20396  
NPI: 1992934988

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## C. 初级保健目录

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM




### PHYSICIANS ASSISTANT

#### **ZAMBRANA, GEORGE**

Provider ID: 478971  
Provider Gender: Male  
License Number: PA16673  
NPI: 1104836659

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION

 133 W MAIN ST STE 100  
EL CAJON, CA 92020  
 Phone: (619) 873-8940  
 After Hours Phone: (619)  
873-8940

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU-SA 8AM-8PM



### PODIATRIST

#### **CHARP, KENNETH**

Provider ID: 478971  
Provider Gender: Male  
License Number: DPM1536  
NPI: 1841384203

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION

 133 W MAIN ST STE 100  
EL CAJON, CA 92020  
 Phone: (619) 873-8940  
 After Hours Phone: (619)  
873-8940







 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### PODIATRIST

#### **JUAREZ, LETICIA**

Provider ID: 418340  
Provider Gender: Female  
License Number: DPM5661  
NPI: 1508393778



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2400  
 After Hours Phone: (619)  
515-2400  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM

### PODIATRIST

#### **LE, DIANA**

Provider ID: 418340  
Provider Gender: Female  
License Number: DPM5734  
NPI: 1184112864



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: ANAHEIM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录



REGIONAL MEDICAL CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO



 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None




American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### REGISTERED PHYSICAL THERAPIST

#### **CUMMINGS, GEORGE**


Provider ID: 418340  
Provider Gender: Male  
License Number: PT295173  
NPI: 1497236384  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498



 After Hours Phone: (619)  
515-2498  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### REGISTERED PHYSICAL THERAPIST

#### **DASCENZO, EMILY**


Provider ID: 569910  
Provider Gender: Female  
License Number: PT40025  
NPI: 1952982761  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP







 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: www.syhealth.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### REGISTERED PHYSICAL THERAPIST



#### **GUTIERREZ, JUSTINE**

Provider ID: 418340  
Provider Gender: Female  
License Number: PT292482  
NPI: 1851834873  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM

### REGISTERED PHYSICAL THERAPIST

#### **KUIOKA, TROY**

Provider ID: 569910  
Provider Gender: Male  
License Number: PT42665  
NPI: 1912640053  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

EL CAJON, CA 92020  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

### REGISTERED PHYSICAL THERAPIST

**MIGNEA, DAVID**  
Provider ID: 418340  
Provider Gender: Male  
License Number: PT293536  
NPI: 1043736879  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER

Hours: M-F  
8:30AM-5:30PM

### **ENCINITAS**

#### CERTIFIED NURSE PRACTITIONER

**MACIAS, ALISSA**  
Provider ID: 480243  
Provider Gender: Female  
License Number: NP21368  
NPI: 1952658445  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1130 2ND ST  
ENCINITAS, CA 92024  
Phone: (760) 736-6767  
After Hours Phone: (760) 736-6767  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER

#### CERTIFIED NURSE PRACTITIONER

**MACIAS, ALISSA**  
Provider ID: 480243  
Provider Gender: Female  
License Number: NP21368  
NPI: 1952658445  
Provider English Spoken: Y

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1130 2ND ST  
ENCINITAS, CA 92024  
Phone: (760) 736-6767  
After Hours Phone: (760) 736-6767  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER







































### CHIROPRACTOR

**LOVERN, JENNIFER**  
Provider ID: 480243  
Provider Gender: Female  
License Number: DC29074  
NPI: 1235469396  
Provider English Spoken: Y  
Provider Language(s) Spoken: Italian, Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1130 2ND ST  
ENCINITAS, CA 92024  
Phone: (760) 736-6767  
After Hours Phone: (760) 736-6767  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录



<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-5PM F 8:30AM-5:30PM</i></p> <hr/> <p><b>CHIROPRACTOR</b></p> <p><b>LOVERN, JENNIFER</b> <i>Provider ID: 480243</i> <i>Provider Gender: Female</i> <i>License Number: DC29074</i> <i>NPI: 1235469396</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Italian, Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 1130 2ND ST ENCINITAS, CA 92024</p> <p> <i>Phone: (760) 736-6767</i>  <i>After Hours Phone: (760) 736-6767</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-5PM F 8:30AM-5:30PM</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>NATH, DEVARSHI</b> <i>Provider ID: 480243</i> <i>Provider Gender: Male</i> <i>License Number: C54157</i> <i>NPI: 1275630618</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Bengali</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 1130 2ND ST ENCINITAS, CA 92024</p> <p> <i>Phone: (760) 753-7842</i>  <i>After Hours Phone: (760) 753-7842</i></p> <p> <i>Website: N/A</i></p>	<p><i>NPI: 1275630618</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Bengali</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 1130 2ND ST ENCINITAS, CA 92024</p> <p> <i>Phone: (760) 753-7842</i>  <i>After Hours Phone: (760) 753-7842</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>NATH, DEVARSHI</b> <i>Provider ID: 480243</i> <i>Provider Gender: Male</i> <i>License Number: C54157</i> <i>NPI: 1275630618</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Bengali</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 1130 2ND ST ENCINITAS, CA 92024</p> <p> <i>Phone: (760) 753-7842</i>  <i>After Hours Phone: (760) 753-7842</i></p> <p> <i>Website: N/A</i></p>	<p><i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>WILLIE, KADEN</b> <i>Provider ID: 480243</i> <i>Provider Gender: Male</i> <i>License Number: 20A17306</i> <i>NPI: 1790133767</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Portuguese</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 1130 2ND ST ENCINITAS, CA 92024</p> <p> <i>Phone: (707) 736-6767</i>  <i>After Hours Phone: (707) 736-6767</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-5PM F 8:30AM-5:30PM</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>WILLIE, KADEN</b> <i>Provider ID: 480243</i></p>
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## C. 初级保健目录





Provider Gender: Male  
License Number: 20A17306  
NPI: 1790133767  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Portuguese  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 1130 2ND ST  
ENCINITAS, CA 92024  
 Phone: (707) 736-6767  
 After Hours Phone: (707)  
736-6767  
 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-5PM  
F 8:30AM-5:30PM

### **FQHC**

#### **TRUECARE,**

Provider ID: 480243  
NPI: 1245246917  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP  
 1130 2ND ST  
ENCINITAS, CA 92024  
 Phone: (760) 753-7842  
Fax: (760) 736-8740  
 After Hours Phone: (760)  
753-7842  
 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-5PM  
F 8:30AM-5:30PM



### **OBSTETRICS / GYNECOLOGY**

#### **MOSTOFIAN, EIMANEH**

Provider ID: 480243  
Provider Gender: Female  
License Number: A97181  
NPI: 1154477628

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1130 2ND ST  
ENCINITAS, CA 92024  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-5PM

F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**



#### **MOSTOFIAN, EIMANEH**

Provider ID: 480243  
Provider Gender: Female  
License Number: A97181  
NPI: 1154477628

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1130 2ND ST  
ENCINITAS, CA 92024  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-5PM  
F 8:30AM-5:30PM


### **PEDIATRICS**

#### **BRION, SONJA**


Provider ID: 386639  
Provider Gender: Female  
NPI: 1306817317


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## C. 初级保健目录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024

 *Phone: (760) 436-4511*  
*Fax: (760) 436-5106*

 *After Hours Phone: (760) 436-4511*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*


### **PEDIATRICS**

#### **CLEMENTINO, NANCY**

*Provider ID: 386643*

*Provider Gender: Female*


*NPI: 1619948619*


 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024

 *Phone: (760) 436-4511*  
*Fax: (760) 436-5106*

 *After Hours Phone: (760) 436-4511*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*



### **PEDIATRICS**

#### **MENDENHALL, ANNA**

*Provider ID: 386635*

*Provider Gender: Female*

*NPI: 1639140650*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL*

HOSPITAL

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024

 *Phone: (760) 436-4511*  
*Fax: (760) 436-5106*


 *After Hours Phone: (760) 436-4511*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**



#### **MURPHY, CARMEL**

*Provider ID: 480243*

*Provider Gender: Female*

*License Number: A103940*


*NPI: 1790824787*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 1130 2ND ST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

ENCINITAS, CA 92024  
 Phone: (760) 753-7842  
 After Hours Phone: (760) 753-7842

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**


#### **MURPHY, CARMEL**

Provider ID: 480243

Provider Gender: Female

License Number: A103940

NPI: 1790824787

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN


DIEGO


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 753-7842

 After Hours Phone: (760) 753-7842

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **TERRY, AMANDA**

Provider ID: 386739

Provider Gender: Female

NPI: 1861770885

 Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND

Board Certified Specialty: No


RADY CHILDRENS HEALTH

NETWORK

 499 N EL CAMINO REAL

STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760) 436-4511

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **TOLBA, KAMEI**

Provider ID: 386624

Provider Gender: Male

NPI: 1144221763

 Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MEMORIAL

HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 499 N EL CAMINO REAL  
 STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760) 436-4511

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 480243

Provider Gender: Male

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## C. 初级保健目录

License Number: PA22667

NPI: 1174964001


Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1130 2ND ST  
ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 480243

Provider Gender: Male

License Number: PA22667

NPI: 1174964001


Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1130 2ND ST  
ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **FORSMAN, SHANA**

Provider ID: 480243

Provider Gender: Female

License Number: PA19437

NPI: 1306026737

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1130 2ND ST  
ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **FORSMAN, SHANA**

Provider ID: 480243

Provider Gender: Female

License Number: PA19437

NPI: 1306026737

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1130 2ND ST  
ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **ESCONDIDO**

#### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **CARNEY, AMY**

Provider ID: 206271

Provider Gender: Female

License Number: NP8169

NPI: 1164445227




Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PALOMAR  
MEDICAL CENTER



Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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## C. 初级保健目录

 728 E VALLEY PKWY  
ESCONDIDO, CA 92025  
 Phone: (760) 737-6900  
 After Hours Phone: (760)  
737-6900


 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU 8AM-5PM  
W 9AM-5PM  
TH-F 8AM-5PM




### CERTIFIED NURSE PRACTITIONER


#### **HACINAS, REYNALDO**

Provider ID: 419344  
Provider Gender: Male  
License Number: NP95003024  
NPI: 1215304860

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
BORREGO COMMUNITY

#### HEALTH FOUNDTION

 1121 E WASHINGTON AVE  
ESCONDIDO, CA 92025  
 Phone: (760) 767-5051  
 After Hours Phone: (760)  
767-5051


 Website: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


### CERTIFIED NURSE PRACTITIONER

#### **KAHL, NICHOLAS**

Provider ID: 588941  
Provider Gender: Male  
License Number: NP95006360  
NPI: 1821306598

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100


 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER




### CERTIFIED NURSE PRACTITIONER


#### **MITCHELL, CATHY**



Provider ID: 424775  
Provider Gender: Female  
License Number: NP4799  
NPI: 1356365365

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No

#### IHP OF SOUTHERN CAL-PHP

 426 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 690-5900  
 After Hours Phone: (760)  
690-5900



 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM



### CERTIFIED NURSE PRACTITIONER


#### **TODD, MIKAYLA**

Provider ID: 588941  
Provider Gender: Female  
License Number: NP95005999  
NPI: 1316478092

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No

#### IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

---

### CHIROPRACTOR

---

#### ROBINSON, DEAN

*Provider ID: 206270*

*Provider Gender: Male*


*License Number: DC12036*


*NPI: 1851320337*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 460 N ELM ST  
ESCONDIDO, CA 92025


 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### CHIROPRACTOR

---


#### ZECHA, RONALD

*Provider ID: 206270*

*Provider Gender: Male*

*License Number: DC28605*

*NPI: 1427252121*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 460 N ELM ST  
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*


 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM SA 8AM-0PM*

---

### FAMILY PRACTICE

---


#### ARRIETA, NOEMI

*Provider ID: 588941*

*Provider Gender: Female*

*License Number: 20A11153*

*NPI: 1912223496*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 704 E GRAND AVE  
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### FAMILY PRACTICE

---

#### AVILA, MICHAEL

*Provider ID: 206270*

*Provider Gender: Male*


*License Number: A159727*


*NPI: 1962936450*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 460 N ELM ST  
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*


 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM SA 8AM-0PM*

---

### FAMILY PRACTICE

---

#### CASTANER, ZALYA

*Provider ID: 206270*

*Provider Gender: Female*





*License Number: A139490*

*NPI: 1487072179*






 *Provider English Spoken: Y*



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


*Cultural Competency: N*  
*Hospital Affiliation: PALOMAR MEDICAL CENTER*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760) 520-8100  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER







### **FAMILY PRACTICE**

**CASTANER, ZALYA**  
*Provider ID: 206271*  
*Provider Gender: Female*  
*License Number: A139490*  
*NPI: 1487072179*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: PALOMAR MEDICAL CENTER*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 728 E VALLEY PKWY  
ESCONDIDO, CA 92025  
 Phone: (760) 737-6900  
 After Hours Phone: (760) 737-6900  
 Website: N/A  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8AM-8PM  
TH-F 8AM-5PM







### **FAMILY PRACTICE**

**COBIAN, VANESSA**  
*Provider ID: 206271*  
*Provider Gender: Female*  
*License Number: A145349*  
*NPI: 1134513039*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*






 728 E VALLEY PKWY  
ESCONDIDO, CA 92025  
 Phone: (760) 737-6900  
 After Hours Phone: (760) 737-6900  
 Website: N/A  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8AM-8PM  
TH-F 8AM-5PM

### **FAMILY PRACTICE**

**COX, VICTORIA**  
*Provider ID: 588941*  
*Provider Gender: Female*

*License Number: C171064*  
*NPI: 1093087819*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: N/A  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**FERRAILOLO, NATALIE**  
*Provider ID: 206270*  
*Provider Gender: Female*  
*License Number: A152372*  
*NPI: 1306290143*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760) 520-8100  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **FAMILY PRACTICE**

#### **HAMILTON, LISA MARIE**

Provider ID: 652372  
Provider Gender: Female  
License Number: 20A14772  
NPI: 1235576059  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

128 N BROADWAY  
ESCONDIDO, CA 92025  
Phone: (760) 546-2858  
After Hours Phone: (760)  
546-2858  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **KAUR, JATINDER**

Provider ID: 206270  
Provider Gender: Female  
License Number: A120771  
NPI: 1912141391

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Hindi, Urdu  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
After Hours Phone: (760)  
520-8100  
Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **FAMILY PRACTICE**

#### **LAI, AMARA**

Provider ID: 206271  
Provider Gender: Female  
License Number: A120348  
NPI: 1790912855  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
728 E VALLEY PKWY  
ESCONDIDO, CA 92025  
Phone: (760) 737-6900

After Hours Phone: (760)  
737-6900

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Hours: M-TU 8AM-5PM  
W 9AM-5PM  
TH-F 8AM-5PM

### **FAMILY PRACTICE**

#### **MATSHE, ZENZIWE**

Provider ID: 665448  
Provider Gender: Female  
NPI: 1285256073  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
Fax: (760) 466-1373

After Hours Phone: (760)  
520-8100  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **MCHENRY, KATHRYN**

Provider ID: 206270

Provider Gender: Female

License Number: 20A14292

NPI: 1326458373

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)  
520-8100

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

---

#### **FAMILY PRACTICE**

### **NAKAMURA, MELANIE**

Provider ID: 206270

Provider Gender: Female

License Number: A107557

NPI: 1104022672


Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)  
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

SA 8AM-0PM

---

#### **FAMILY PRACTICE**

### **PATEL, JITENBHAI**

Provider ID: 206270

Provider Gender: Male

License Number: A94128

NPI: 1902921406


Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)  
520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

#### **FAMILY PRACTICE**

### **PATEL, JITENBHAI**

Provider ID: 206271

Provider Gender: Male

License Number: A94128

NPI: 1902921406

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 728 E VALLEY PKWY

ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)  
737-6900


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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#### **FAMILY PRACTICE**

### **RAO, USHA**

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL






Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **RASHCOVSKY SCHIFF, KARIN**

Provider ID: 206270  
 Provider Gender: Female  
 License Number: A82173  
 NPI: 1699706333  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: French  
 Cultural Competency: N  
 Hospital Affiliation: PALOMAR MEDICAL CENTER  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 460 N ELM ST  
 ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760) 520-8100  
 Website: www.ihpsocal.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

### **PROVIDER**

### **FAMILY PRACTICE**

#### **RODARTE, GABRIEL**

Provider ID: 206266  
 Provider Gender: Male  
 License Number: A87906  
 NPI: 1184649212  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP







 425 N DATE ST  
 ESCONDIDO, CA 92025  
 Phone: (760) 520-8340  
 After Hours Phone: (760) 520-8340  
 Website: www.ihpsocal.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\21  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **SANDHU, BASANT**

Provider ID: 206271  
 Provider Gender: Male  
 License Number: A140398  
 NPI: 1265795744  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: German, Hindi,

Punjabi, Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 728 E VALLEY PKWY  
 ESCONDIDO, CA 92025  
 Phone: (760) 737-6900  
 After Hours Phone: (760) 737-6900  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8AM-8PM TH-F 8AM-5PM

### **FAMILY PRACTICE**



#### **SCHULTZ, JAMES**

Provider ID: 206271  
 Provider Gender: Male  
 License Number: G61829  
 NPI: 1356376164  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Farsi, Greek, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER  
 Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### IHP OF SOUTHERN CAL-PHP



 728 E VALLEY PKWY  
ESCONDIDO, CA 92025  
 Phone: (760) 737-6900  
 After Hours Phone: (760)  
737-6900  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER

#### **FAMILY PRACTICE**



### SCHULTZ, JAMES

Provider ID: 206270  
Provider Gender: Male  
License Number: G61829  
NPI: 1356376164  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi, Greek,  
Spanish  
Cultural Competency: N  
Hospital Affiliation:

SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
PALOMAR MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760)



520-8100




 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER




#### **FAMILY PRACTICE**

### TANTOD, KULIN

Provider ID: 206270  
Provider Gender: Male  
License Number: A109655  
NPI: 1902058928

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No



IHP OF SOUTHERN CAL-PHP  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760)  
520-8100

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM







#### **FAMILY PRACTICE**

### THOMPSON, CHERYL

Provider ID: 206270


Provider Gender: Female  
License Number: A102687  
NPI: 1548429863  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No



IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760)  
520-8100  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-0PM

#### **FQHC**

### CENTRO MEDICO ESCONDIDO,

Provider ID: 419344  
NPI: 1023349883  
 Provider English Spoken: Y  
Cultural Competency: N  
BORREGO COMMUNITY  
HEALTH FOUNDTION

 1121 E WASHINGTON AVE  
ESCONDIDO, CA 92025  
 Phone: (760) 871-0606

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Fax: (858) 634-6918

☎ After Hours Phone: (760) 871-0606

🌐 Website: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 8AM-OPM  
M-F 8AM-8PM  
SA 8AM-OPM

---

### FQHC

---

#### ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 652372

NPI: 1417640491

📄 Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 128 N BROADWAY  
ESCONDIDO, CA 92025

☎ Phone: (619) 515-2474

☎ After Hours Phone: (619) 515-2474

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

---

### FQHC

---

#### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

📄 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 460 N ELM ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 466-2745

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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### FQHC

---

#### NEIGHBORHOOD

#### HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775

NPI: 1437335353

📄 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 426 N DATE ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

Fax: (360) 462-2747

☎ After Hours Phone: (760) 690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

---

### FQHC

---

#### NEIGHBORHOOD

#### HEALTHCARE PIDS AND PRENATAL,

Provider ID: 206266

NPI: 1265618185

📄 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 425 N DATE ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

☎ After Hours Phone: (760) 520-8340

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

---

### FQHC

---

#### NEIGHBORHOOD

#### HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

NPI: 1720264641

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 728 E VALLEY PKWY  
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

Fax: (360) 462-2748

 After Hours Phone: (760)  
737-6900


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU 8AM-5PM  
W 9AM-5PM  
TH-F 8AM-5PM

### FQHC

#### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,


Provider ID: 588941

NPI: 1801438239

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

Fax: (760) 745-7847

 After Hours Phone: (619)  
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE


#### AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 128 N BROADWAY  
ESCONDIDO, CA 92025

 Phone: (760) 546-2858

 After Hours Phone: (760)  
546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### CHEN, MARGARET


Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
After Hours Phone: (760) 520-8100  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
SA 8AM-0PM

### INTERNAL MEDICINE

#### CHEN, MARGARET

Provider ID: 235296  
Provider Gender: Female  
NPI: 1659305084  
Provider English Spoken: Y  
Provider Language(s) Spoken: Greek, Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
Fax: (360) 462-2745  
After Hours Phone: (760) 520-8100  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-0PM

### INTERNAL MEDICINE

#### VETTICADEN, SANTOSH

Provider ID: 206270  
Provider Gender: Male  
License Number: C53062  
NPI: 1679102461  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
After Hours Phone: (760) 520-8100  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
SA 8AM-0PM

### PEDIATRICS

#### AGUILAR, EDITA

Provider ID: 206266  
Provider Gender: Female  
License Number: A56054  
NPI: 1467407411  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

425 N DATE ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8340  
After Hours Phone: (760) 520-8340  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### AGUILAR, EDITA

Provider ID: 424775  
Provider Gender: Female  
License Number: A56054  
NPI: 1467407411  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
426 N DATE ST  
ESCONDIDO, CA 92025  
Phone: (760) 690-5900  
After Hours Phone: (760) 690-5900  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

N

 *Accessibility: CONTACT PROVIDER*

---

### PEDIATRICS

---


#### ALDANA, NANCY

*Provider ID: 424775*

*Provider Gender: Female*

*License Number: A62467*

*NPI: 1558371963*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY*

*CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *426 N DATE ST ESCONDIDO, CA 92025*

 *Phone: (760) 520-8340*

 *After Hours Phone: (760) 520-8340*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\21*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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### PEDIATRICS

---

#### CHOW, BYRON

*Provider ID: 206270*

*Provider Gender: Male*

*License Number: A78116*


*NPI: 1619907607*


 *Provider English Spoken: Y Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *460 N ELM ST ESCONDIDO, CA 92025*

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

---

### PEDIATRICS


---


#### COHEN, CARA

*Provider ID: 661879*

*Provider Gender: Female*

*NPI: 1215021274*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*


*Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO,*

*PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*


*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 *625 CITRACADO PKWY STE 100*

*ESCONDIDO, CA 92025*

 *Phone: (760) 746-2641*

*Fax: (760) 740-2178*

 *After Hours Phone: (760) 746-2641*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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### PEDIATRICS

---

#### COULLAHAN, JESSICA

*Provider ID: 661887*

*Provider Gender: Female*

*NPI: 1750579108*

 *Provider English Spoken: Y Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。










## C. 初级保健目录

 625 CITRACADO PKWY STE 100  
 ESCONDIDO, CA 92025  
 Phone: (760) 746-2641  
 Fax: (760) 740-2178  
 After Hours Phone: (760) 746-2641  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8:30AM-0PM

### **PEDIATRICS**



#### **CURET, ZULMA**

Provider ID: 206270  
 Provider Gender: Female  
 License Number: A119661  
 NPI: 1841561107  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 460 N ELM ST  
 ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760) 520-8100  
 Website: www.ihpsocal.org




Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER


### **PEDIATRICS**

#### **DOSHI, NEELIMA**

Provider ID: 424775  
 Provider Gender: Female  
 License Number: A67626  
 NPI: 1417921578  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi, Spanish  
 Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP



 426 N DATE ST  
 ESCONDIDO, CA 92025  
 Phone: (760) 690-5900  
 After Hours Phone: (760) 690-5900

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\21  
 American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER


### **PEDIATRICS**


#### **DOSHI, NEELIMA**

Provider ID: 640252  
 Provider Gender: Female  
 NPI: 1417921578  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No COMMUNITY CARE IPA LLC

 426 N DATE ST  
 ESCONDIDO, CA 92025  
 Phone: (760) 520-8340  
 Fax: (360) 462-2752



 After Hours Phone: (760) 520-8340

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\18  
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **IBRAHIM, MAGED**

Provider ID: 419344  
 Provider Gender: Male  
 License Number: C141296  
 NPI: 1306852934  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic  
 Cultural Competency: N  
 Hospital Affiliation: POMONA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP  
Board Certified Specialty: No  
BORREGO COMMUNITY HEALTH FOUNDTION

1121 E WASHINGTON AVE  
ESCONDIDO, CA 92025  
Phone: (760) 871-0606  
After Hours Phone: (760) 871-0606

Website: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 8AM-0PM  
M-F 8AM-8PM  
SA 8AM-0PM

### PEDIATRICS

#### MALEKSHAMRAN, KEYVAN

Provider ID: 419344  
Provider Gender: Male  
License Number: A94845  
NPI: 1952466112

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi, Persian,  
Spanish

Cultural Competency: N  
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL,  
DESERT REGIONAL MED CTR  
Board Certified Specialty: No  
BORREGO COMMUNITY

#### HEALTH FOUNDTION

1121 E WASHINGTON AVE  
ESCONDIDO, CA 92025

Phone: (760) 871-0606  
After Hours Phone: (760) 871-0606

Website: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### SONG, JOYCE

Provider ID: 661892  
Provider Gender: Female  
NPI: 1417510694

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

625 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92025

Phone: (760) 746-2641  
Fax: (760) 740-2178  
After Hours Phone: (760) 746-2641

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

Accessibility: CONTACT

#### PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### STRAZICICH, KARLA

Provider ID: 206270  
Provider Gender: Female  
License Number: A45413  
NPI: 1134154958

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

460 N ELM ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8100  
After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### TELLECHEA-SANCHEZ, SELMIRA

Provider ID: 424775  
Provider Gender: Female  
License Number: G83438  
NPI: 1730288747

Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

426 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 690-5900

After Hours Phone: (760)  
690-5900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

**THIRUNAGARI, HARRSHA**

Provider ID: 419344

Provider Gender: Female

License Number: A64928

NPI: 1447472212

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Spanish,  
Telugu

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL  
CENTER, RIVERSIDE

COMMUNITY HOSP, Parkview  
Community Hospital Medical  
Center

Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION

1121 E WASHINGTON AVE  
ESCONDIDO, CA 92025

Phone: (760) 871-0606

After Hours Phone: (760)  
871-0606

Website: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 8AM-0PM  
M-F 8AM-8PM  
SA 8AM-0PM

### PEDIATRICS

**ZAND, FARIBA**

Provider ID: 87737

Provider Gender: Female

NPI: 1356373674

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Persian,  
Spanish

Cultural Competency: N

Hospital Affiliation: MERCY  
GENERAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,  
UCSD MEDICAL CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

240 W MISSION AVE STE A  
ESCONDIDO, CA 92025

Phone: (760) 747-5400

Fax: (760) 747-2286

After Hours Phone: (760)  
747-5400

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PHYSICIANS ASSISTANT

**BAISLEY, SHAWN**

Provider ID: 588941

Provider Gender: Male

License Number: PA52347

NPI: 1376936120

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE  
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N


Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT




**SHARPE, NORMA**





了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 588941  
Provider Gender: Female  
License Number: PA20490  
NPI: 1619100237  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER


### PODIATRIST

**NEGRON, RICARDO**  
Provider ID: 206271  
Provider Gender: Male  
License Number: DPM5260  
NPI: 1932548393  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: Providence  
St Joseph Hospital  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 728 E VALLEY PKWY  
ESCONDIDO, CA 92025

 Phone: (760) 737-6900  
 After Hours Phone: (760)  
737-6900  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **FALLBROOK**

### CERTIFIED NURSE PRACTITIONER

**EVERETT, ELIZABETH**  
Provider ID: 624122  
Provider Gender: Female  
License Number: NP95025094  
NPI: 1942952767  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760)  
723-6200  
 Website: www.vistacommunityclinic.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M 8AM-4PM

TU 8AM-0:30PM  
W-TH 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

**EVERETT, ELIZABETH**  
Provider ID: 624122  
Provider Gender: Female  
License Number: NP95025094  
NPI: 1942952767  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760)  
723-6200  
 Website: www.vistacommunityclinic.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

### CERTIFIED NURSE PRACTITIONER


**EVERETT, ELIZABETH**  
Provider ID: 624122  
Provider Gender: Female  
License Number: NP95025094




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 1942952767

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---


**KELLEHER, BRIDGET**

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---


**KELLEHER, BRIDGET**

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---

**KELLEHER, BRIDGET**

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

**CERTIFIED NURSE**  
**PRACTITIONER**


---




**RACKHAM, KELLY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 624122  
 Provider Gender: Male  
 License Number: NP95015717  
 NPI: 1801497284

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
 FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760) 723-6200


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N


 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM  
 TU 8AM-0:30PM  
 W-TH 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **RACKHAM, KELLY**

Provider ID: 624122  
 Provider Gender: Male  
 License Number: NP95015717  
 NPI: 1801497284

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST


FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760) 723-6200  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N


 Accessibility: CONTACT PROVIDER




 Hours: M 8AM-4PM  
 TU 8AM-0:30PM  
 W-TH 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **RACKHAM, KELLY**

Provider ID: 624122  
 Provider Gender: Male  
 License Number: NP95015717  
 NPI: 1801497284

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
 FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760) 723-6200


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM  
 TU 8AM-0:30PM  
 W-TH 8AM-5PM


### FQHC

#### **FALLBROOK FAMILY HLTH**


##### **CTR,**

Provider ID: 183910

NPI: 1982756086

 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD  
 FALLBROOK, CA 92028

 Phone: (760) 451-4720  
 Fax: (760) 451-4700

 After Hours Phone: (760) 451-4720


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
 SA 8AM-5PM


### FQHC

#### **VISTA COMMUNITY CLINIC,**

Provider ID: 624122






NPI: 1316501562

 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760) 723-6200  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-4PM  
 TU 8AM-0:30PM  
 W-TH 8AM-5PM



### FQHC

**VISTA COMMUNITY CLINIC,**  
 Provider ID: 624122  
 NPI: 1851300123  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 321 E ALVARADO ST  
 FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760) 723-6200  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-4PM  
 TU 8AM-0:30PM


W-TH 8AM-5PM

### FQHC







**VISTA COMMUNITY CLINIC,**  
 Provider ID: 624122  
 NPI: 1649662719  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 321 E ALVARADO ST  
 FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760) 723-6200  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-4PM  
 TU 8AM-0:30PM  
 W-TH 8AM-5PM





### PEDIATRICS

**DEL RE, AMANDA**  
 Provider ID: 238960  
 Provider Gender: Female  
 NPI: 1548499957  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 1107 S MISSION RD  
 FALLBROOK, CA 92028  
 Phone: (760) 451-0070  
 Fax: (760) 451-1499  
 After Hours Phone: (760) 451-0070  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

**PAIK, JULIANA**  
 Provider ID: 504522  
 Provider Gender: Female  
 NPI: 1528167087  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 1107 S MISSION RD  
 FALLBROOK, CA 92028  
 Phone: (760) 451-0070  
 Fax: (760) 451-1499  
 After Hours Phone: (760)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

451-0070  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### ROBINSON, DAISY

Provider ID: 230579

Provider Gender: Female

NPI: 1659389740

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

321 E ALVARADO ST  
FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)  
723-6200

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT

#### PROVIDER

Hours: M-TH 8AM-4PM

### PEDIATRICS

#### VU, WENDY

Provider ID: 183910

Provider Gender: Female

License Number: A169529

NPI: 1508148370

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD  
FALLBROOK, CA 92028

Phone: (760) 451-4770

After Hours Phone: (760)  
451-4770

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-7:30PM  
SA 8AM-5PM

### IMPERIAL BEACH

#### FAMILY PRACTICE

#### JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

949 PALM AVE  
IMPERIAL BEACH, CA  
91932

Phone: (619) 429-3733

After Hours Phone: (619)  
429-3733

Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8:30AM-9PM  
F 8:30AM-5PM  
SA 8:30AM-2PM

### FQHC

#### IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678

NPI: 1790718351

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

949 PALM AVE  
IMPERIAL BEACH, CA  
91932

Phone: (619) 429-3733

Fax: (619) 628-5550

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

☎ *After Hours Phone: (619) 429-3733*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

🗣️ *American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **INTERNAL MEDICINE**

#### **RYAN, DANA**

*Provider ID: 179678*

*Provider Gender: Female*

*License Number: A66830*

*NPI: 1780609990*

🗣️ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

📍 949 PALM AVE  
IMPERIAL BEACH, CA  
91932

☎ *Phone: (619) 429-3733*

☎ *After Hours Phone: (619) 429-3733*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

🗣️ *American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

### **PEDIATRICS**

#### **DOKICH, SRETENKA**

*Provider ID: 179678*

*Provider Gender: Female*

*License Number: A51447*

*NPI: 1154409035*

🗣️ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

📍 949 PALM AVE  
IMPERIAL BEACH, CA  
91932

☎ *Phone: (619) 429-3733*

☎ *After Hours Phone: (619) 429-3733*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

🗣️ *American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

### **JULIAN**

### **CLINIC OUTPATIENT**

#### **SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**

*Provider ID: 664467*

*NPI: 1235804139*

🗣️ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*IHP OF SOUTHERN CAL-PHP*

📍 2721 WASHINGTON ST  
JULIAN, CA 92036

☎ *Phone: (619) 662-4100*  
*Fax: (619) 662-4196*

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

🗣️ *American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

#### **WYLIE, BLAKE**

*Provider ID: 664467*

*Provider Gender: Male*

*License Number: 20A11088*

*NPI: 1922314145*

🗣️ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

📍 2721 WASHINGTON ST  
JULIAN, CA 92036

☎ *Phone: (619) 662-4100*

☎ *After Hours Phone: (619) 662-4100*


🌐 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

🗣️ *American Sign Language (ASL): N*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### FQHC

---

#### **SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**


*Provider ID: 664467*

*NPI: 1235804139*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

 2721 WASHINGTON ST  
JULIAN, CA 92036

 *Phone: (619) 662-4100*

*Fax: (619) 662-4196*

 *After Hours Phone: (619) 662-4100*


 *Website: N/A*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### LA JOLLA

---

#### **PEDIATRICS**

---

#### **GAINOR, GRETCHEN**

*Provider ID: 537752*


*Provider Gender: Female*


*NPI: 1174504757*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH*

#### **NETWORK**

 7300 GIRARD AVE STE 106  
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

*Fax: (858) 459-4399*

 *After Hours Phone: (858) 459-4351*

 *Website: N/A*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
*SA 8AM-0PM*

---

#### **PEDIATRICS**

---

#### **GANDHI, SHEETAL**

*Provider ID: 282029*

*Provider Gender: Female*

*NPI: 1700858859*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 4150 REGENTS PARK ROW  
STE 355

LA JOLLA, CA 92037

 *Phone: (858) 457-2043*

*Fax: (858) 457-2092*

 *After Hours Phone: (858)*

*457-2043*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

#### **PEDIATRICS**

---

#### **HUNTER, WENDY**

*Provider ID: 377597*

*Provider Gender: Female*

*NPI: 1053515551*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSF*

*BENIOFF CHILDREN'S*

*HOSPITAL OAKLAND, RADY*


*CHILDRENS HOSPITAL SAN*

*DIEGO*


*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

 7300 GIRARD AVE STE 106  
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

*Fax: (858) 459-4399*

 *After Hours Phone: (858) 459-4351*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*

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## C. 初级保健目录

**PROVIDER**  
 Hours: M-F 8AM-5PM


### **PEDIATRICS**

#### **PARSONS, GENEVIEVE**

Provider ID: 24122

Provider Gender: Female

NPI: 1699700914

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL


CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL  
HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7300 GIRARD AVE STE 106  
LA JOLLA, CA 92037

 Phone: (858) 459-4351

Fax: (858) 459-4399

 After Hours Phone: (858)  
459-4351


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


### **PEDIATRICS**

#### **PASTORE, SIMONE**

Provider ID: 600881

Provider Gender: Female

NPI: 1528588134

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH  
NETWORK

 4150 REGENTS PARK ROW  
STE 355

LA JOLLA, CA 92037

 Phone: (858) 457-2043

Fax: (858) 457-2092

 After Hours Phone: (858)  
457-2043


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **ROBERTS, KENDALL**

Provider ID: 48933

Provider Gender: Male

NPI: 1265762033


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 4150 REGENTS PARK ROW  
STE 355

LA JOLLA, CA 92037

 Phone: (858) 457-2043

Fax: (858) 457-2092

 After Hours Phone: (858)  
457-2043


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **TUNG, VIVIAN**

Provider ID: 11291


Provider Gender: Female


NPI: 1285665133

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7300 GIRARD AVE STE 106  
LA JOLLA, CA 92037

 Phone: (858) 459-4351

Fax: (858) 459-4399

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## C. 初级保健目录

📞 After Hours Phone: (858) 459-4351

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

### LA MESA

#### CERTIFIED NURSE PRACTITIONER

##### **WARD, KATHERINE**

Provider ID: 613881

Provider Gender: Female

NPI: 1477223576

📄 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

📞 Phone: (619) 464-6434

Fax: (619) 464-5109

📞 After Hours Phone: (619) 464-6434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM

#### CERTIFIED NURSE PRACTITIONER

##### **WARD, KATHERINE**

Provider ID: 613887

Provider Gender: Female

NPI: 1477223576

📄 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 8881 FLETCHER PKWY STE 205

LA MESA, CA 91942

📞 Phone: (619) 464-6434

Fax: (619) 464-5109

📞 After Hours Phone: (619) 464-6434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM

#### CERTIFIED NURSE PRACTITIONER

##### **WARD, KATHERINE**

Provider ID: 480827

Provider Gender: Female

License Number: NP95017921

NPI: 1477223576

📄 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
BORREGO COMMUNITY HEALTH FOUNDTION

📍 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

📞 Phone: (616) 464-6434

📞 After Hours Phone: (616) 464-6434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

#### FAMILY PRACTICE

##### **PATEL, HEMANSHU**

Provider ID: 664660

Provider Gender: Male

NPI: 1255777439

📄 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: VICTOR VALLEY COMMUNITY HOSP, BARSTOW COMMUNITY

HOSPITAL, DESERT VALLEY HOSPITAL, Providence St Mary

Medical Center, VICTOR







VALLEY GLOBAL MED CTR

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


 7339 EL CAJON BLVD STE 1  
LA MESA, CA 91942  
 Phone: (619) 698-0606  
Fax: (619) 332-5149  
 After Hours Phone: (619)  
698-0606  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5:30PM

### **FQHC**

#### **LA MESA PEDIATRICS,**


Provider ID: 480827

NPI: 1033759311

 Provider English Spoken: Y  
Cultural Competency: N  
BORREGO COMMUNITY  
HEALTH FOUNDTION

 8881 FLETCHER PKWY STE  
200  
LA MESA, CA 91942  
 Phone: (619) 464-6434  
Fax: (619) 464-5109

 After Hours Phone: (619)  
464-6434


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **BULLOCH, EDGAR**

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital  
Board Certified Specialty: No  
BORREGO COMMUNITY  
HEALTH FOUNDTION

 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)  
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **PAPA, RHETT**

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


BORREGO COMMUNITY

HEALTH FOUNDTION

 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)  
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **ALSHEIKH, HUDA**

Provider ID: 480827

Provider Gender: Female

License Number: C133872

NPI: 1487746855

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

BORREGO COMMUNITY



HEALTH FOUNDTION


 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942

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## C. 初级保健目录


 Phone: (619) 464-6434  
 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


### **PEDIATRICS**

#### **ALSHEIKH, HUDA**

Provider ID: 435468

Provider Gender: Female

NPI: 1487746855

 Provider English Spoken: Y


 Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: Yes  
 RADY CHILDRENS HEALTH NETWORK

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 7:30AM-6PM

W-F 7:30AM-6:30PM

SA 8:30AM-5PM


### **PEDIATRICS**

#### **ALSHEIKH, HUDA**

Provider ID: 451191

Provider Gender: Female

NPI: 1487746855

 Provider English Spoken: Y


 Provider Language(s) Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK


 8881 FLETCHER PKWY STE 205

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 7:30AM-6PM  
 W-F 7:30AM-6:30PM  
 SA 8:30AM-5PM

### **PEDIATRICS**

#### **CLAY, CORRIE**

Provider ID: 536652

Provider Gender: Female

NPI: 1437207750


 Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM  
 SA 11:30AM-3:30PM

### **PEDIATRICS**

#### **EMPIE, KRISTEN**

Provider ID: 648986

Provider Gender: Female

NPI: 1093343105

 Provider English Spoken: Y  
 Cultural Competency: N



Board Certified Specialty: No  
 RADY CHILDRENS HEALTH


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### NETWORK

 8881 FLETCHER PKWY STE 200  
LA MESA, CA 91942

 Phone: (619) 464-6434  
 Fax: (619) 464-5109


 After Hours Phone: (619) 464-6434


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM

### PEDIATRICS

#### EMPIE, KRISTEN


Provider ID: 648987



Provider Gender: Female

NPI: 1093343105

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 8881 FLETCHER PKWY STE 205  
LA MESA, CA 91942

 Phone: (619) 464-6434  
 Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM


### PEDIATRICS

#### GIANFORTUNE, RACHEL

Provider ID: 433091

Provider Gender: Female

NPI: 1912193301

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish



Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 8881 FLETCHER PKWY STE 200  
LA MESA, CA 91942

 Phone: (619) 464-6434  
 Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

#### GIANFORTUNE, RACHEL

Provider ID: 450501

Provider Gender: Female

NPI: 1912193301

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish



Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 8881 FLETCHER PKWY STE 205  
LA MESA, CA 91942

 Phone: (619) 464-6434  
 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER








 Hours: M-F 8AM-5PM

### PEDIATRICS

#### IMUS, PAUL



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

Provider ID: 239590  
 Provider Gender: Male  
 NPI: 1104116680  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, GROSSMONT HOSPITAL  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 8881 FLETCHER PKWY STE 200  
 LA MESA, CA 91942  
 Phone: (619) 401-0404  
 Fax: (619) 401-0522  
 After Hours Phone: (619) 401-0404  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM

### **PEDIATRICS**


#### **MOFFATT, KYRRA**






Provider ID: 275099  
 Provider Gender: Female  
 NPI: 1194922419  
 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 8881 FLETCHER PKWY STE 200  
 LA MESA, CA 91942  
 Phone: (619) 401-0404  
 Fax: (619) 401-0522  
 After Hours Phone: (619) 401-0404  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **PEDIATRICS**




#### **MOLINOS, NICOLE**

Provider ID: 538098  
 Provider Gender: Female  
 NPI: 1538685524  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: Yes  
 RADY CHILDRENS HEALTH NETWORK

 6942 UNIVERSITY AVE STE A  
 LA MESA, CA 91942  
 Phone: (619) 698-2184  
 Fax: (619) 698-2084  
 After Hours Phone: (619) 698-2184  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM

### **PEDIATRICS**






#### **RONQUILLO, RINA**

Provider ID: 377359  
 Provider Gender: Female  
 NPI: 1407047749  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish, Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MEMORIAL HOSPITAL  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 8881 FLETCHER PKWY STE 200

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

LA MESA, CA 91942  
 Phone: (619) 464-6434  
 Fax: (619) 464-5109  
 After Hours Phone: (619) 464-6434  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM

### PEDIATRICS

#### SHORT, RICHARD


Provider ID: 60736  
 Provider Gender: Male  
 NPI: 1568552727  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation:  
 GROSSMONT HOSPITAL,  
 RADY CHILDRENS HOSPITAL  
 SAN DIEGO, SHARP MARY  
 BIRCH HOSP FOR WOMEN  
 AND NEWBORNS  
 Board Certified Specialty: Yes  
 RADY CHILDRENS HEALTH  
 NETWORK  
 8881 FLETCHER PKWY STE 200  
 LA MESA, CA 91942  
 Phone: (619) 464-6434  
 Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-6PM SA 11:30AM-3:30PM

### LAKESIDE

### CHIROPRACTOR

#### PAGE, BIANCA

Provider ID: 353843  
 Provider Gender: Female  
 License Number: DC33688  
 NPI: 1649787607  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 10039 VINE ST  
 LAKESIDE, CA 92040  
 Phone: (858) 218-3000  
 After Hours Phone: (858) 218-3000  
 Website: www.ihpsocal.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM




### FAMILY PRACTICE

#### FERRAIOLO, NATALIE

Provider ID: 353843  
 Provider Gender: Female  
 License Number: A152372  
 NPI: 1306290143  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 10039 VINE ST  
 LAKESIDE, CA 92040  
 Phone: (858) 218-3000  
 After Hours Phone: (858) 218-3000  
 Website: www.ihpsocal.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### FAMILY PRACTICE

#### GUNPAT, JOSHUA

Provider ID: 673860  
 Provider Gender: Male  
 NPI: 1114458775  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 10039 VINE ST  
 LAKESIDE, CA 92040  
 Phone: (619) 390-9975  
 Fax: (360) 462-2744

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

☎ *After Hours Phone: (619) 390-9975*

🌐 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

#### **LIU-BARBARO, DOROTHY**

*Provider ID: 353843*

*Provider Gender: Female*

*License Number: A115342*

*NPI: 1851602270*

☐ *Provider English Spoken: Y*

☐ *Provider Language(s) Spoken: Chinese, Mandarin, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

📍 10039 VINE ST  
LAKESIDE, CA 92040

☎ *Phone: (619) 440-2751*

☎ *After Hours Phone: (619) 440-2751*

🌐 *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **FQHC**

#### **NEIGHBORHOOD**

#### **HEALTHCARE LAKESIDE,**

*Provider ID: 353843*

*NPI: 1932384120*

☐ *Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

📍 10039 VINE ST  
LAKESIDE, CA 92040

☎ *Phone: (858) 218-3000*

*Fax: (360) 462-2744*

☎ *After Hours Phone: (858) 218-3000*

🌐 *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **GENERAL PRACTICE**

#### **MANNINO, ELIZABETH**

*Provider ID: 353843*

*Provider Gender: Female*

*License Number: A43914*

*NPI: 1548290463*

☐ *Provider English Spoken: Y*

☐ *Provider Language(s) Spoken: Italian, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

📍 10039 VINE ST  
LAKESIDE, CA 92040

☎ *Phone: (858) 218-3000*

☎ *After Hours Phone: (858) 218-3000*

🌐 *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

### **INTERNAL MEDICINE**

#### **MCFARLAND, NATHAN**

*Provider ID: 353843*

*Provider Gender: Male*

*License Number: A75411*

*NPI: 1265462196*

☐ *Provider English Spoken: Y*

☐ *Provider Language(s) Spoken: Italian, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

📍 10039 VINE ST  
LAKESIDE, CA 92040

☎ *Phone: (858) 218-3000*

☎ *After Hours Phone: (858) 218-3000*

🌐 *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### LEMON GROVE

#### CERTIFIED NURSE PRACTITIONER

##### ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female


License Number: NP95009933


NPI: 1831557024


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

#### CERTIFIED NURSE PRACTITIONER

##### ARVIZU, PALOMA

Provider ID: 419139

Provider Gender: Female

License Number: NP95008782

NPI: 1689139396

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

#### CERTIFIED NURSE PRACTITIONER

##### SMITH, SHARON


Provider ID: 419139

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)

515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

#### CERTIFIED NURSE PRACTITIONER

##### SMITH, SHARON


Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

#### CERTIFIED NURSE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


<b>PRACTITIONER</b>	<b>SAN DIEGO</b>	<b>Hours: M-F 9AM-5PM</b>
<b>TOTH, JESSICA</b> Provider ID: 419139 Provider Gender: Female License Number: NP95001050 NPI: 1578993788 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945 <input type="checkbox"/> Phone: (619) 515-2550 <input type="checkbox"/> After Hours Phone: (619) 515-2550 <input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	<input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945 <input type="checkbox"/> Phone: (619) 515-2550 <input type="checkbox"/> After Hours Phone: (619) 515-2550 <input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	
<b>CERTIFIED NURSE PRACTITIONER</b>	<b>FAMILY PRACTICE</b>	
<b>WILLIAMS, TAKISHA</b> Provider ID: 419139 Provider Gender: Female License Number: NP95013978 NPI: 1881727386 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF	<b>DORN, TIA</b> Provider ID: 419139 Provider Gender: Female License Number: C172318 NPI: 1285074740 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945 <input type="checkbox"/> Phone: (619) 515-2550 <input type="checkbox"/> After Hours Phone: (619) 515-2550 <input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	
	<b>FAMILY PRACTICE</b>	
	<b>KIM, YUHEE</b> Provider ID: 419139 Provider Gender: Female License Number: A107323 NPI: 1629289400 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Korean Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945 <input type="checkbox"/> Phone: (619) 515-2550 <input type="checkbox"/> After Hours Phone: (619) 515-2550 <input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	
	<b>FQHC</b>	
	<b>LEMONGROVE FAMILY HEALTH CENTER,</b> Provider ID: 419139 NPI: 1427282466 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N FAMILY HEALTH CENTERS OF SAN DIEGO	


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 Fax: (619) 825-9577


 After Hours Phone: (619)  
515-2550


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### INTERNAL MEDICINE

#### **GALLARES, DANIEL**

Provider ID: 419139

Provider Gender: Male


License Number: A165925


NPI: 1245689488

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

### PROVIDER

### INTERNAL MEDICINE

#### **MAHDAI, SUZAN**

Provider ID: 419139

Provider Gender: Female


License Number: A154838


NPI: 1598015679

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### OBSTETRICS / GYNECOLOGY



#### **ALIMONOS, LYSISTRATI**

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### OBSTETRICS / GYNECOLOGY

#### **BUECHNER, CHARLENE**

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SHARP MARY  
BIRCH HOSP FOR WOMEN

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### AND NEWBORNS

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

7592 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)  
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

7592 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)  
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

7592 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)  
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

Provider ID: 419139

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

7592 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)  
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DORUELO, ASHLEY**

Provider ID: 419139

Provider Gender: Female

License Number: A178499






NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*  
*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*  
 7592 BROADWAY  
LEMON GROVE, CA 91945  
 *Phone: (619) 515-2550*  
 *After Hours Phone: (619) 515-2550*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**





#### **FOLCH TORRES-AGUIAR, BEATRIZ**





*Provider ID: 419139*  
*Provider Gender: Female*  
*License Number: A148014*  
*NPI: 1457794752*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish, Yue Chinese*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital,*

*SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*  
 7592 BROADWAY  
LEMON GROVE, CA 91945  
 *Phone: (619) 515-2550*  
 *After Hours Phone: (619) 515-2550*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

*Provider ID: 419139*  
*Provider Gender: Female*  
*License Number: C174771*  
*NPI: 1053392035*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*  
*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*  
 7592 BROADWAY  
LEMON GROVE, CA 91945  
 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**

*Provider ID: 419139*  
*Provider Gender: Female*  
*License Number: A72005*  
*NPI: 1649208711*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*  
*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*  
 7592 BROADWAY  
LEMON GROVE, CA 91945  
 *Phone: (619) 515-2550*  
 *After Hours Phone: (619) 515-2550*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): **RODRIGUEZ JEREZ, ROBERTO**

N


 Accessibility: CONTACT PROVIDER

Provider ID: 419139

Provider Gender: Male

License Number: A154298

NPI: 1710316450

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 7592 BROADWAY LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

NPI: 1952751711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 7592 BROADWAY LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **LOEFFLER, ALLISON**

Provider ID: 419139

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 7592 BROADWAY LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619) 515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**

Provider ID: 419139

Provider Gender: Female

License Number: A164859

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

Provider ID: 419139

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No


FAMILY HEALTH CENTERS OF SAN DIEGO


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## C. 初级保健目录

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **WINESBURG, JENNIFER**

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


FAMILY HEALTH CENTERS OF  
SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)

515-2500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F

8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **ZIEG, ALAN**

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **JACKSON, DANA**


Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL

CENTER, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 7592 BROADWAY  
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)  
515-2550

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<b>PEDIATRICS</b>		<b>CERTIFIED NURSE PRACTITIONER</b>	
<b>SLEIMAN, JOSEPH</b> Provider ID: 419139 Provider Gender: Male License Number: A102060 NPI: 1093976748 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Arabic, French, Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945 <input type="checkbox"/> Phone: (619) 515-2550 <input type="checkbox"/> After Hours Phone: (619) 515-2550 <input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 7592 BROADWAY LEMON GROVE, CA 91945 <input type="checkbox"/> Phone: (619) 515-2550 <input type="checkbox"/> After Hours Phone: (619) 515-2550 <input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	mahan.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-TH 8AM-6PM F 8AM-5PM	<b>AQUINO, FELINO</b> Provider ID: 418302 Provider Gender: Male License Number: NP22974 NPI: 1356684781 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Tagalog Cultural Competency: N Board Certified Specialty: No OPERATION SAMAHAN <input type="checkbox"/> 2101 GRANGER AVE NATIONAL CITY, CA 91950 <input type="checkbox"/> Phone: (844) 200-2426 <input type="checkbox"/> After Hours Phone: (844) 200-2426 <input type="checkbox"/> Website: www.operationsa mahan.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM
<b>PHYSICIANS ASSISTANT</b>		<b>NATIONAL CITY</b>	
<b>FLEMING, DAVID</b> Provider ID: 419139 Provider Gender: Male License Number: PA12416 NPI: 1932329505 <input type="checkbox"/> Provider English Spoken: Y	<b>AQUINO, FELINO</b> Provider ID: 417102 Provider Gender: Male License Number: NP22974 NPI: 1356684781 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Tagalog Cultural Competency: N Board Certified Specialty: No OPERATION SAMAHAN <input type="checkbox"/> 2743 HIGHLAND AVE NATIONAL CITY, CA 91950 <input type="checkbox"/> Phone: (844) 200-2426 <input type="checkbox"/> After Hours Phone: (844) 200-2426 <input type="checkbox"/> Website: www.operationsa		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **CERTIFIED NURSE** **PRACTITIONER**


#### **DHARKAR-SURBER, SAPNA**

Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No


LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

Fax: (619) 434-7310

 After Hours Phone: (619)  
434-7308


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE** **PRACTITIONER**


#### **LIM, IMELDA**


Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


OPERATION SAMAHAN

 2101 GRANGER AVE

NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426

 Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **CERTIFIED NURSE** **PRACTITIONER**


#### **LIM, IMELDA**

Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No


OPERATION SAMAHAN

 2743 HIGHLAND AVE

NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426


 Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-6PM  
F 8AM-5PM

### **CERTIFIED NURSE** **PRACTITIONER**

#### **LUM, YUIN-WAH**

Provider ID: 418930

Provider Gender: Female

License Number: NP95010663

NPI: 1942764477

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1000 EUCLID AVE

NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)  
515-2399

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>NEVAREZ, IRENE</b>            Provider ID: 185270            Provider Gender: Female            License Number: NP95009891            NPI: 1003166646   Provider English Spoken: Y   Provider Language(s) Spoken: Spanish            Cultural Competency: N            Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR            Board Certified Specialty: No            LA MAESTRA FAMILY CLINIC   217 HIGHLAND AVE            NATIONAL CITY, CA 91950   Phone: (619) 564-8765   After Hours Phone: (619) 564-8765   Website: www.lamaestra.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p>License Number: NP4430            NPI: 1346437464   Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No            LA MAESTRA FAMILY CLINIC   217 HIGHLAND AVE            NATIONAL CITY, CA 91950   Phone: (619) 434-7308   After Hours Phone: (619) 434-7308   Website: www.lamaestra.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5:30PM</p>	<p>NATIONAL CITY, CA 91950   Phone: (619) 434-7308   After Hours Phone: (619) 434-7308   Website: www.lamaestra.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5:30PM</p>
<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>OCHOA, ERLINDA</b>            Provider ID: 185270            Provider Gender: Female</p>	<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>REAL, MARIA</b>            Provider ID: 185270            Provider Gender: Female            License Number: NP17328            NPI: 1548450471   Provider English Spoken: Y            Cultural Competency: N            Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA            Board Certified Specialty: No            LA MAESTRA FAMILY CLINIC   217 HIGHLAND AVE</p>	<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>REID, EMILY</b>            Provider ID: 185270            Provider Gender: Female            License Number: NP95002766            NPI: 1083081467   Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No            LA MAESTRA FAMILY CLINIC   217 HIGHLAND AVE            NATIONAL CITY, CA 91950   Phone: (619) 434-7308   After Hours Phone: (619) 434-7308   Website: www.lamaestra.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

🕒 Hours: M-F 8AM-5:30PM

### **CERTIFIED NURSE PRACTITIONER**

#### **VERDUZCO GONZALEZ, AURORA**

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

📍 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎️ Phone: (619) 434-7308

🕒 After Hours Phone: (619)  
434-7308

🌐 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5:30PM

### **CERTIFIED NURSE PRACTITIONER**

#### **VILLANUEVA DE GUTIE, BERENICE**

Provider ID: 185270

Provider Gender: Female

License Number: NP95002188  
NPI: 1952795536

🗨️ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

📍 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎️ Phone: (619) 434-7308

🕒 After Hours Phone: (619)  
434-7308

🌐 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5:30PM

### **CERTIFIED NURSE PRACTITIONER**

#### **WILLIAMS, BREAUNA**

Provider ID: 185270

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

📍 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎️ Phone: (619) 434-7308

🕒 After Hours Phone: (619)  
434-7308

🌐 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5:30PM

### **CHIROPRACTOR**

#### **HOURIHAN, KEITH**

Provider ID: 185270

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

🗨️ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

📍 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎️ Phone: (619) 434-7308

🕒 After Hours Phone: (619)  
434-7308

🌐 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: TH 8AM-2PM

### **FAMILY PRACTICE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female


License Number: A167529


NPI: 1316310840


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

#### **FAMILY PRACTICE**

### ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

### SAN DIEGO

 1000 EUCLID AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)  
515-2399

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

#### **FAMILY PRACTICE**

### BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

OPERATION SAMAHAN

 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT

### PROVIDER

 Hours: M-TU  
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

#### **FAMILY PRACTICE**

### CAMPBELL, BRIANNA

Provider ID: 227418

Provider Gender: Female

License Number: A157488


NPI: 1316479892


Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: CHULA  
VISTA COMM HOSP

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

#### **FAMILY PRACTICE**




### CANLAS, AVELINO

Provider ID: 417102

Provider Gender: Male






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录






License Number: A74854  
 NPI: 1275682528  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: PARADISE  
 VALLEY HOSPITAL  
 Board Certified Specialty: No  
 OPERATION SAMAHAN  
 2743 HIGHLAND AVE  
 NATIONAL CITY, CA 91950  
 Phone: (844) 200-2426  
 After Hours Phone: (844)  
 200-2426  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 8AM-6PM  
 F 8AM-5PM



### **FAMILY PRACTICE**

**CARRIEDO-CENICEROS,  
 MARIA**  
 Provider ID: 227412  
 Provider Gender: Female  
 License Number: A78373  
 NPI: 1295746618  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N




Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1136 D AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [syhealth.org/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)  
 N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

**CEVALLOS, JAMES**  
 Provider ID: 227412  
 Provider Gender: Male  
 License Number: A55469  
 NPI: 1720181829  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1136 D AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 Fax: (619) 474-3722  
 After Hours Phone: (619)

662-4100  
 Website: [syhealth.org/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**


**DILLON, MAYRA**  
 Provider ID: 227412  
 Provider Gender: Female  
 License Number: A112571  
 NPI: 1629232715  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1136 D AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 Fax: (619) 336-2323  
 After Hours Phone: (619)  
 662-4100  
 Website: [syhealth.org/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*American Sign Language (ASL):* License Number: 20A18460  
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### **FAMILY PRACTICE**


#### **HERNANDEZ, JOANNA**

*Provider ID: 227412*

*Provider Gender: Female*

*License Number: A138919*

*NPI: 1154749315*


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 1136 D AVE  
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: syhealth.org/clinics/national-city-family-clinic-1*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### **FAMILY PRACTICE**

#### **LANUZA, MARK**

*Provider ID: 418930*


*Provider Gender: Male*


*NPI: 1992230593*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*

 1000 EUCLID AVE  
NATIONAL CITY, CA 91950

 *Phone: (619) 515-2399*

 *After Hours Phone: (619) 515-2399*


 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:30AM-3:30PM*

*TU 10:30AM-5:30PM*

*W 8:30AM-3:30PM*

*TH 10:30AM-5:30PM*

*F 8:30AM-3:30PM*

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### **FAMILY PRACTICE**


#### **LAW, KAREN**

*Provider ID: 227418*

*Provider Gender: Female*

*License Number: A138534*

*NPI: 1205253150*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: CHULA VISTA COMM HOSP*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/paradise-hills-family-clinic*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*

---

### **FAMILY PRACTICE**

#### **LEUTE, ERIC**

*Provider ID: 227418*

*Provider Gender: Male*

*License Number: A80832*

*NPI: 1720171507*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MEMORIAL HOSPITAL,*


*SCRIPPS MERCY HOSPITAL,*

*SCRIPPS MERCY HOSPITAL*

*CHULA VISTA*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*

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## C. 初级保健目录

☎ After Hours Phone: (619) 662-4100

🌐 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **MEDINA, ALEXANDER**

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 330 E 8TH ST NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT

### **PROVIDER**

### **FAMILY PRACTICE**

#### **MOHAMEDI, NADIA**

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 2400 E 8TH ST STE A NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **NAVARRO, VANESSA MARIA**

Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 2400 E 8TH ST STE A NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

☎ After Hours Phone: (619) 662-4100

🌐 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **NIKZAD, JASON**

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

330 E 8TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### OCEGUEDA, JOSHUA

Provider ID: 227412

Provider Gender: Male

License Number: A165184

NPI: 1336643345

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1136 D AVE  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/national-city-family-clinic-1](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

#### RICHARDSON, DANIELLE

Provider ID: 227418

Provider Gender: Female

License Number: A127555

NPI: 1609142892

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### ROBERTS, POMAI

Provider ID: 227412

Provider Gender: Female

License Number: A103218

NPI: 1023278314

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1136 D AVE  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/national-city-family-clinic-1](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

#### SCHUMAKER, EDWARD

Provider ID: 185270

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)  
434-7308

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **SNOOK, BRIAN**

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

NPI: 1295977353

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2806

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **STONES, RACHEL**

Provider ID: 185270

Provider Gender: Female

License Number: A167184

NPI: 1720583040

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (619) 280-4213

After Hours Phone: (619)  
280-4213

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: TH 8AM-2PM

### **FAMILY PRACTICE**

#### **VELASQUEZ, SHARON**

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FQHC**

#### **FAMILY HEALTH CTR SD**

**NATIONAL CITY,**

Provider ID: 418930

NPI: 1417409228







Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1000 EUCLID AVE  
NATIONAL CITY, CA 91950

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

 Phone: (619) 515-2399  
 Fax: (619) 269-0053  
 After Hours Phone: (619) 515-2399  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
**PROVIDER**  
 Hours: M 8:30AM-3:30PM  
 TU 10:30AM-5:30PM  
 W 8:30AM-3:30PM  
 TH 10:30AM-5:30PM  
 F 8:30AM-3:30PM

### FQHC






#### LA MAESTRA FAMILY CLINIC INC,



Provider ID: 185270  
 NPI: 1336353721  
 Provider English Spoken: Y  
 Cultural Competency: N  
 LA MAESTRA FAMILY CLINIC  
 217 HIGHLAND AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 434-7308  
 Fax: (619) 434-7310  
 After Hours Phone: (619) 434-7308  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

**PROVIDER**  
 Hours: TH 8AM-2PM

### FQHC



#### OPERATION SAMAHAN -



**NATIONAL C,**  
 Provider ID: 417102  
 NPI: 1801907449  
 Provider English Spoken: Y  
 Cultural Competency: N  
 OPERATION SAMAHAN  
 2743 HIGHLAND AVE  
 NATIONAL CITY, CA 91950  
 Phone: (844) 200-2426  
 Fax: (619) 474-3919  
 After Hours Phone: (844) 200-2426  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N





 Accessibility: CONTACT  
**PROVIDER**  
 Hours: M-TH 8AM-6PM  
 F 8AM-5PM

### FQHC

#### OPERATION SAMAHAN GRANGER SCHOOL BASED,








Provider ID: 418302  
 NPI: 1205134517  
 Provider English Spoken: Y  
 Cultural Competency: N  
 OPERATION SAMAHAN  
 2101 GRANGER AVE

NATIONAL CITY, CA 91950  
 Phone: (844) 200-2426  
 Fax: (619) 434-8999

 After Hours Phone: (844) 200-2426  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
**PROVIDER**  
 Hours: M-F 8AM-5PM

### FQHC


#### SAN YSIDRO HEALTH

**NATIONAL CITY,**  
 Provider ID: 227412  
 NPI: 1003869363  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 1136 D AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 Fax: (619) 474-3722  
 After Hours Phone: (619) 662-4100  
 Website: [syhealth.org/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
**PROVIDER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Hours: M-F 8AM-5PM

### FQHC

#### **SAN YSIDRO HEALTH**

##### **PARADISE HILLS,**


Provider ID: 227418

NPI: 1598907487

 Provider English Spoken: Y  
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807


 After Hours Phone: (619)  
662-4100


 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### FQHC

#### **SAN YSIDRO HEALTH SOUTH BAY,**


Provider ID: 361428

NPI: 1851757215

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 330 E 8TH ST  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 434-3514


 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### HEPATOLOGY


#### **GISH, ROBERT**


Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Dutch, French,  
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: LOMA


LINDA UNIVERSITY COMM


MED CTR


Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)  
434-7308


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM

### INTERNAL MEDICINE


#### **BRAVERMAN, IRA**

Provider ID: 10635

Provider Gender: Male

NPI: 1124039755

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE


VALLEY HOSPITAL

Board Certified Specialty: Yes


IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

 610 EUCLID AVE STE 201  
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)  
267-8181

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE

#### **HEKMAT, RAZI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录

Provider ID: 78388  
Provider Gender: Male  
NPI: 1871501205  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PARADISE VALLEY HOSPITAL  
Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD  
 610 EUCLID AVE STE 201  
NATIONAL CITY, CA 91950  
 Phone: (619) 267-8181  
Fax: (619) 479-6750  
 After Hours Phone: (619) 267-8181  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM

### **INTERNAL MEDICINE**






#### **LAMANTIA, MICHELE**

Provider ID: 361428  
Provider Gender: Female  
License Number: G71855  
NPI: 1124176102  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 330 E 8TH ST  
NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**




#### **LAMANTIA, MICHELE**

Provider ID: 227412  
Provider Gender: Female  
License Number: G71855  
NPI: 1124176102  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1136 D AVE  
NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: syhealth.org/clinics/national-city-family-clinic-1  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT

### **PROVIDER**

### **INTERNAL MEDICINE**

#### **ROUEL, WADI**

Provider ID: 185270  
Provider Gender: Male  
License Number: C55979  
NPI: 1740254713  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Spanish, Syriac  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
 Phone: (619) 434-7308  
 After Hours Phone: (619) 434-7308  
 Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM

### **NEUROLOGY**

#### **CANTU-REYNA, GUILLERMO**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 185270

Provider Gender: Male

License Number: A41375


NPI: 1447389101


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 798-3977

 After Hours Phone: (619)  
798-3977

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **ASLIAN, AZITA**

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER


### **PEDIATRICS**


#### **BAILONY, AHMAD**

Provider ID: 146949

Provider Gender: Male

NPI: 1790914422

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

PARADISE VALLEY HOSPITAL,

SHARP CHULA VISTA MED


CTR, SHARP MEMORIAL

HOSPITAL


Board Certified Specialty: Yes

RADY CHILDRENS HEALTH  
NETWORK

 655 EUCLID AVE STE 205  
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945

Fax: (619) 475-5048

 After Hours Phone: (619)  
470-1945


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### **PEDIATRICS**

#### **BAILONY, MOHAMMED**

Provider ID: 30132

Provider Gender: Male

NPI: 1376625913

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

PARADISE VALLEY HOSPITAL,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: Yes


RADY CHILDRENS HEALTH

NETWORK


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 655 EUCLID AVE STE 205  
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945

Fax: (619) 475-5048

 After Hours Phone: (619)  
470-1945


 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### PEDIATRICS

#### **BARBADILLO, TERESITA**

Provider ID: 84258

Provider Gender: Female


NPI: 1952416695

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PARADISE  
VALLEY HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 655 EUCLID AVE STE 201  
NATIONAL CITY, CA 91950

 Phone: (619) 267-8601

Fax: (619) 267-2242

 After Hours Phone: (619)  
267-8601

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### PEDIATRICS

#### **BONSU, BEMA**

Provider ID: 227412

Provider Gender: Male

License Number: C55180

NPI: 1932106986

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN


DIEGO, UCSF BENIOFF


CHILDREN'S HOSPITAL


OAKLAND

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1136 D AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/national-city-family-clinic-1](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### **CONE, STEPHANIE**

Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)  
434-7308

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### **DAY, CHRISTOPHER**

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

 Provider English Spoken: Y

 Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

1000 EUCLID AVE  
 NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619) 515-2399

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

### **PEDIATRICS**

#### **FRESNO, BLANCA**

Provider ID: 102433

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

RADY CHILDRENS HEALTH

#### **NETWORK**

655 EUCLID AVE STE 207  
 NATIONAL CITY, CA 91950

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619) 475-4575

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: SU-SA 8AM-5PM

### **PEDIATRICS**

#### **GARCIA, RAFAEL**

Provider ID: 84954

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

610 EUCLID AVE STE 302  
 NATIONAL CITY, CA 91950

Phone: (619) 527-7700

Fax: (619) 527-3226

After Hours Phone: (619)

527-7700

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **RANA, DEBORAH**

Provider ID: 227418

Provider Gender: Female

License Number: G88347

NPI: 1033191457

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A

NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

---

### **PEDIATRICS**


---

#### **UY, CARMELITA**

*Provider ID: 424443*

*Provider Gender: Female*

*NPI: 1154431484*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CHULA VISTA MED CTR,*

*SCRIPPS MERCY HOSPITAL*


*CHULA VISTA*

*Board Certified Specialty: No*


*RADY CHILDRENS HEALTH*


*NETWORK*

 *2340 E 8TH ST STE E  
NATIONAL CITY, CA 91950*

 *Phone: (619) 216-8500*

*Fax: (619) 216-8511*

 *After Hours Phone: (619)  
216-8511*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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### **PEDIATRICS**


---


#### **VALENCIA, MARILES**

*Provider ID: 104060*

*Provider Gender: Female*

*NPI: 1275541625*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL CHULA*

*VISTA, PARADISE VALLEY*

*HOSPITAL, SHARP CHULA*

*VISTA MED CTR, RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO, SCRIPPS MERCY*


*HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

*NETWORK*

 *655 EUCLID AVE STE 207  
NATIONAL CITY, CA 91950*

 *Phone: (619) 475-4575*

*Fax: (619) 475-4578*

 *After Hours Phone: (619)  
475-4575*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU-SA 8AM-5PM*

---

### **PHYSICIANS ASSISTANT**

---


#### **ARMENTA, JORGE**

*Provider ID: 185270*

*Provider Gender: Male*


*License Number: PA13694*


*NPI: 1346382611*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC*

 *217 HIGHLAND AVE  
NATIONAL CITY, CA 91950*

 *Phone: (619) 434-7308*

 *After Hours Phone: (619)  
434-7308*

 *Website: www.lamaestra.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM*

---

### **PHYSICIANS ASSISTANT**

---

#### **BANGS, SASHA**

*Provider ID: 418930*

*Provider Gender: Female*

*License Number: PA55660*


*NPI: 1720524374*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF*

*SAN DIEGO*

 *1000 EUCLID AVE  
NATIONAL CITY, CA 91950*

 *Phone: (619) 515-2399*

 *After Hours Phone: (619)  
515-2399*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

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## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**


#### **MARTINEZ-MURGUIA, IRENE**

Provider ID: 185270

Provider Gender: Female

License Number: PA20296

NPI: 1447492889


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308


 After Hours Phone: (619)  
434-7308

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**


#### **MERCER, KELLY**

Provider ID: 185270

Provider Gender: Female

License Number: PA21625

NPI: 1154609790


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)  
434-7308


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM

## **OCEANSIDE**

### **CERTIFIED NURSE**

#### **PRACTITIONER**


#### **BAEK, KILHYO**

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571


NPI: 1053776914

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **BAEK, KILHYO**

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571


NPI: 1053776914


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SA 9AM-4PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **BAEK, KILHYO**

Provider ID: 206341

Provider Gender: Female


License Number: NP95003571


NPI: 1053776914

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **BINETTE, DONYA**


Provider ID: 480247

Provider Gender: Female


License Number: NP95001653


NPI: 1427325166


 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054


 Phone: (760) 757-5841

 After Hours Phone: (760)  
757-5841

 Website: N/A  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---



#### **BINETTE, DONYA**

Provider ID: 480247

Provider Gender: Female


License Number: NP95001653


NPI: 1427325166


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)  
757-5841

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **BROMAN, GRETCHEN**

Provider ID: 206341

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **CERTIFIED NURSE**

---

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### PRACTITIONER

#### **BROMAN, GRETCHEN**

Provider ID: 206341

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE

#### PRACTITIONER

#### **BROMAN, GRETCHEN**

Provider ID: 206341

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE

#### PRACTITIONER

#### **BROMAN, GRETCHEN**

Provider ID: 402436

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE

#### PRACTITIONER

#### **BROMAN, GRETCHEN**

Provider ID: 402436

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE

#### PRACTITIONER

#### **CHILAKA, SAMUEL**

Provider ID: 206341

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: NP95017483  
NPI: 1679140644

☐ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **CHILAKA, SAMUEL**

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483

NPI: 1679140644

☐ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

🕒 After Hours Phone: (760)

631-5000

🌐 Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **CHILAKA, SAMUEL**

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483

NPI: 1679140644

☐ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **CHRISTY, TYLER**

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

☐ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **CHRISTY, TYLER**

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

☐ Provider English Spoken: Y  
Cultural Competency: N

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## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

#### **CHRISTY, TYLER**

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

#### **CORY, ALLISON**

Provider ID: 206341

Provider Gender: Female

License Number: NP20497

NPI: 1194027706

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

#### **CORY, ALLISON**

Provider ID: 206341  
Provider Gender: Female

License Number: NP20497

NPI: 1194027706

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommu  
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

#### **CORY, ALLISON**

Provider ID: 206341

Provider Gender: Female

License Number: NP20497

NPI: 1194027706






Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 Phone: (760) 631-5000  
 After Hours Phone: (760) 631-5000  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95025094  
NPI: 1942952767  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760) 631-5000  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER








 Hours: M-F 8AM-5PM SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**






**EVERETT, ELIZABETH**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95025094  
NPI: 1942952767  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
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**EVERETT, ELIZABETH**  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI**  
Provider ID: 402436  
Provider Gender: Female  
License Number: NP95006826  
NPI: 1619246907  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Mandarin  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
 After Hours Phone: (760) 631-5000

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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### **CERTIFIED NURSE PRACTITIONER**

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**HALGEDAHL, YI**

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Mandarin


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

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631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SA 9AM-4PM

---

### **CERTIFIED NURSE PRACTITIONER**

---


**HALGEDAHL, YI**

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Mandarin


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### **CERTIFIED NURSE PRACTITIONER**

---

**HALGEDAHL, YI**

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Mandarin


Cultural Competency: N


Board Certified Specialty: No

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 Hours: M-F 8AM-5PM

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### **CERTIFIED NURSE PRACTITIONER**

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**HALGEDAHL, YI**

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

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## C. 初级保健目录

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Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

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Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

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Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

Provider ID: 206341

Provider Gender: Female

License Number: NP95022679  
NPI: 1407545221

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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OCEANSIDE, CA 92057

Phone: (760) 631-5000

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Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)

Medi-Cal Open Panel: Yes

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Accessibility: CONTACT  
PROVIDER

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**HARRIS, PAMELA**

Provider ID: 206341

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

Provider English Spoken: Y  
Cultural Competency: N

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## C. 初级保健目录




631-5000  
 Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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### **CERTIFIED NURSE PRACTITIONER**

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**HARRIS, PAMELA**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95022679  
NPI: 1407545221  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **CERTIFIED NURSE PRACTITIONER**


---

**HOWELL, AMANDA**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95020894  
NPI: 1427797943  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000  
 Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM







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### **CERTIFIED NURSE PRACTITIONER**

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**HOWELL, AMANDA**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95020894  
NPI: 1427797943  
 Provider English Spoken: Y  
Cultural Competency: N






Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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 After Hours Phone: (760)  
631-5000  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
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 Hours: M-F 8AM-5PM  
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**HOWELL, AMANDA**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95020894  
NPI: 1427797943  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
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631-5000  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

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## C. 初级保健目录

American Sign Language (ASL):

SA 9AM-4PM

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **KELLEHER, BRIDGET**

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM

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### **CERTIFIED NURSE PRACTITIONER**

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Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

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 Provider Language(s)  
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Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
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 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **TAYLOR, CHRISTOPHER**

Provider ID: 206341

Provider Gender: Male


License Number: NP95020584


NPI: 1851747166


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
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 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
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### **CERTIFIED NURSE PRACTITIONER**

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#### **TAYLOR, CHRISTOPHER**

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

 Provider English Spoken: Y  
Cultural Competency: N






Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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## C. 初级保健目录








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American Sign Language (ASL): N  
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### **CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**  
Provider ID: 206341  
Provider Gender: Male  
License Number: NP95020584  
NPI: 1851747166  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER








 Hours: M-F 8AM-5PM SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**






**WAGNER, TASIA**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95001650  
NPI: 1598158768  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760) 631-5000  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

**WAGNER, TASIA**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95001650  
NPI: 1598158768

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
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License Number: NP95001650  
NPI: 1598158768  
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## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**


**ESPINOSA-SILVA, YAMINAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

**ESPINOSA-SILVA, YAMINAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL


ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

**FATLAND, SARAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **FATLAND, SARAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): License Number: A135564  
NPI: 1699038125

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **FATLAND, SARAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **KETCHEL, CLINT**

Provider ID: 206341

Provider Gender: Male

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, Spanish,  
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI  
CITY MEDICAL CTR, WHITTIER  
HOSPITAL MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **KETCHEL, CLINT**

Provider ID: 206341

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Provider Gender: Male*  
*License Number: A135564*  
*NPI: 1699038125*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic, Spanish, Syriac*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
 SOUTHWEST HEALTHCARE  
 RANCHO SPRINGS HOSPITAL,  
 SOUTHWEST HEALTHCARE  
 INLAND VALLEY HOSPITAL,  
 SCRIPPS MEMORIAL  
 HOSPITAL ENCINITAS, TRI  
 CITY MEDICAL CTR, WHITTIER  
 HOSPITAL MEDICAL CENTER  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
 *After Hours Phone: (760) 631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

### **FAMILY PRACTICE**

**KETCHEL, CLINT**

*Provider ID: 206341*  
*Provider Gender: Male*  
*License Number: A135564*  
*NPI: 1699038125*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic, Spanish, Syriac*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
 SOUTHWEST HEALTHCARE  
 RANCHO SPRINGS HOSPITAL,  
 SOUTHWEST HEALTHCARE  
 INLAND VALLEY HOSPITAL,  
 SCRIPPS MEMORIAL  
 HOSPITAL ENCINITAS, TRI  
 CITY MEDICAL CTR, WHITTIER  
 HOSPITAL MEDICAL CENTER  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
 *After Hours Phone: (760) 631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

### **FAMILY PRACTICE**

**KETCHEL, CLINT**  
*Provider ID: 402434*  
*Provider Gender: Male*  
*License Number: A135564*  
*NPI: 1699038125*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic, Spanish, Syriac*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
 SOUTHWEST HEALTHCARE  
 RANCHO SPRINGS HOSPITAL,  
 SOUTHWEST HEALTHCARE  
 INLAND VALLEY HOSPITAL,  
 SCRIPPS MEMORIAL  
 HOSPITAL ENCINITAS, TRI  
 CITY MEDICAL CTR, WHITTIER  
 HOSPITAL MEDICAL CENTER  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 818 PIER VIEW WAY  
 OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
 *After Hours Phone: (760) 631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### **KETCHEL, CLINT**

Provider ID: 402434

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Spanish,  
Syriac

Cultural Competency: N


Hospital Affiliation:


SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI  
CITY MEDICAL CTR, WHITTIER  
HOSPITAL MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

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### **FAMILY PRACTICE**

---

### **NGUYEN, DANIELA**

Provider ID: 206341

Provider Gender: Female


License Number: 20A21066


NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **FAMILY PRACTICE**

---

### **NGUYEN, DANIELA**

Provider ID: 206341

Provider Gender: Female


License Number: 20A21066


NPI: 1891069662


Provider English Spoken: Y

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **FAMILY PRACTICE**

---

### **NGUYEN, DANIELA**

Provider ID: 206341

Provider Gender: Female


License Number: 20A21066


NPI: 1891069662


Provider English Spoken: Y

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SA 9AM-4PM

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### **FAMILY PRACTICE**

---

#### **PANICKER, CIBU**

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **PANICKER, CIBU**

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **PANICKER, CIBU**

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **PONSFORD, DIANA**

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371


NPI: 1407204969


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **FAMILY PRACTICE**

---

#### **PONSFORD, DIANA**

Provider ID: 402436

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female  
License Number: 20A17371  
NPI: 1407204969  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 517 N HORNE ST  
OCEANSIDE, CA 92054  
☎ Phone: (760) 631-5000  
🕒 After Hours Phone: (760)  
631-5000  
🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **VIDAL, MONICA**

Provider ID: 206341  
Provider Gender: Female  
License Number: 20A8949  
NPI: 1871791749  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057  
☎ Phone: (760) 631-5000  
🕒 After Hours Phone: (760)  
631-5000  
🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **VIDAL, MONICA**

Provider ID: 206341  
Provider Gender: Female  
License Number: 20A8949  
NPI: 1871791749  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057  
☎ Phone: (760) 631-5000  
🕒 After Hours Phone: (760)  
631-5000  
🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **VIDAL, MONICA**

Provider ID: 206341  
Provider Gender: Female  
License Number: 20A8949  
NPI: 1871791749  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057  
☎ Phone: (760) 631-5000  
🕒 After Hours Phone: (760)  
631-5000  
🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM








### **FQHC**

#### **TRUECARE,**

Provider ID: 480247  
NPI: 1245246917



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录






 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**IHP OF SOUTHERN CAL-PHP**  
 2210 MESA DR STE 300  
 OCEANSIDE, CA 92054  
 *Phone: (760) 757-5841*  
*Fax: (760) 736-8740*  
 *After Hours Phone: (760)*  
*757-5841*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**  
 *Accessibility: CONTACT*  
**PROVIDER**  
 *Hours: M-F 8AM-5PM*  
*SA 8AM-4:30PM*



### FQHC

**VISTA COMMUNITY CLINIC,**  
*Provider ID: 206341*  
*NPI: 1649662719*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**IHP OF SOUTHERN CAL-PHP**  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**



 *Accessibility: CONTACT*  
**PROVIDER**  
 *Hours: M-F 8AM-5PM*  
*SA 9AM-4PM*






### FQHC

**VISTA COMMUNITY CLINIC,**  
*Provider ID: 206341*  
*NPI: 1851300123*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**IHP OF SOUTHERN CAL-PHP**  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**








 *Accessibility: CONTACT*  
**PROVIDER**  
 *Hours: M-F 8AM-5PM*  
*SA 9AM-4PM*

### FQHC

**VISTA COMMUNITY CLINIC,**  
*Provider ID: 206341*  
*NPI: 1316501562*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**IHP OF SOUTHERN CAL-PHP**  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**  
 *Accessibility: CONTACT*  
**PROVIDER**  
 *Hours: M-F 8AM-5PM*  
*SA 9AM-4PM*

### FQHC

**VISTA COMMUNITY CLINIC**  
**HORNE STREET,**  
*Provider ID: 402436*  
*NPI: 1609094036*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**IHP OF SOUTHERN CAL-PHP**  
 517 N HORNE ST  
 OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: www.vistacommunityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**  
 *Accessibility: CONTACT*  
**PROVIDER**  
 *Hours: M-F 8AM-5PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

SA 9AM-4PM

### FQHC

#### VISTA COMMUNITY CLINIC

HORNE STREET,

Provider ID: 402436

NPI: 1609094036

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

### FQHC

#### VISTA COMMUNITY CLINIC

PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

### FQHC

#### VISTA COMMUNITY CLINIC

PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TU 8AM-5PM

W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

### INTERNAL MEDICINE

#### HASSANI, FARZANEH

Provider ID: 206341

Provider Gender: Female

License Number: C54458

NPI: 1942204979

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Farsi,  
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

CTR, UC DAVIS MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

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## C. 初级保健目录

<hr/> <p style="text-align: center;"><b>INTERNAL MEDICINE</b></p> <hr/> <p><b>HASSANI, FARZANEH</b>            Provider ID: 206341            Provider Gender: Female            License Number: C54458            NPI: 1942204979</p> <p> Provider English Spoken: Y   Provider Language(s)            Spoken: Arabic, Farsi, Persian, Urdu            Cultural Competency: N            Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR            Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD            OCEANSIDE, CA 92057   Phone: (760) 631-5000   After Hours Phone: (760) 631-5000   Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM SA 9AM-4PM</p> <hr/> <p style="text-align: center;"><b>INTERNAL MEDICINE</b></p> <hr/> <p><b>HASSANI, FARZANEH</b>            Provider ID: 206341</p>	<p>Provider Gender: Female            License Number: C54458            NPI: 1942204979</p> <p> Provider English Spoken: Y   Provider Language(s)            Spoken: Arabic, Farsi, Persian, Urdu            Cultural Competency: N            Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR            Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD            OCEANSIDE, CA 92057   Phone: (760) 631-5000   After Hours Phone: (760) 631-5000   Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM SA 9AM-4PM</p> <hr/> <p style="text-align: center;"><b>PEDIATRICS</b></p> <hr/> <p><b>CALHOUN, CHANELLE</b>            Provider ID: 344145            Provider Gender: Female            License Number: G75390            NPI: 1437166709</p> <p> Provider English Spoken: Y   Provider Language(s)            Spoken: Spanish            Cultural Competency: N            Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL</p>	<p>Spoken: Spanish            Cultural Competency: N            Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS            Board Certified Specialty: No RYD CHILDRENS HEALTH NETWORK</p> <p> 2210 MESA DR STE 300            OCEANSIDE, CA 92054   Phone: (760) 736-6767            Fax: (760) 736-8740   After Hours Phone: (760) 736-6767   Website: N/A            Medi-Cal Open Panel: Yes            Min/Max Age: 0\19            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM</p> <hr/> <p style="text-align: center;"><b>PEDIATRICS</b></p> <hr/> <p><b>CALHOUN, CHANELLE</b>            Provider ID: 480247            Provider Gender: Female            License Number: G75390            NPI: 1437166709</p> <p> Provider English Spoken: Y   Provider Language(s)            Spoken: Spanish            Cultural Competency: N            Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL</p>
--	--	--

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300  
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)  
891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300  
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)  
891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300  
OCEANSIDE, CA 92054

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

### PEDIATRICS

#### CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300  
OCEANSIDE, CA 92054

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

### PEDIATRICS

#### CURLEY, EDWARD

Provider ID: 240736

Provider Gender: Male

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Hospital Affiliation: TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

*Fax: (760) 736-8740*

 *After Hours Phone: (760) 736-6767*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM SA 8AM-4:30PM*

### **PEDIATRICS**

#### **DANIELS, SARAH**

*Provider ID: 433806*

*Provider Gender: Female*

*NPI: 1730446527*

 *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY*

*CHILDRENS HOSPITAL SAN*


*DIEGO, SCRIPPS MEMORIAL*


*HOSPITAL ENCINITAS,*


*SCRIPPS MEMORIAL*

*HOSPITAL*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3605 VISTA WAY STE 130  
BLDG B  
OCEANSIDE, CA 92056

 Phone: (760) 547-1010

 *After Hours Phone: (760) 547-1010*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**


#### **GUNTA, SUJANA**


*Provider ID: 402434*

*Provider Gender: Female*

*License Number: A109056*

*NPI: 1932304342*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: RADY*


*CHILDRENS HOSPITAL SAN*

*DIEGO, TRI CITY MEDICAL CTR*


*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**

#### **GUNTA, SUJANA**


*Provider ID: 402434*

*Provider Gender: Female*

*License Number: A109056*

*NPI: 1932304342*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu*

*Cultural Competency: N*

*Hospital Affiliation: RADY*


*CHILDRENS HOSPITAL SAN*


*DIEGO, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*






























*Min/Max Age: 0\None*

*American Sign Language (ASL):*

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## C. 初级保健目录

<p>N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i></p>	<p><i>Provider Gender: Female</i>  <i>NPI: 1336520766</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i></p>	<p><i>IHP OF SOUTHERN CAL-PHP</i>   4700 N RIVER RD            OCEANSIDE, CA 92057   <i>Phone: (760) 631-5000</i>  <i>Fax: (760) 414-3731</i></p>
<b>PEDIATRICS</b>		
<p><b>KRAMER, MELISSA</b>  <i>Provider ID: 469759</i>  <i>Provider Gender: Female</i>  <i>NPI: 1467833467</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i>  <i>Board Certified Specialty: No</i>  <i>RADY CHILDRENS HEALTH NETWORK</i>   3605 VISTA WAY BLDG B            OCEANSIDE, CA 92056   <i>Phone: (760) 547-1010</i>  <i>Fax: (760) 547-1011</i>   <i>After Hours Phone: (760) 547-1010</i>   <i>Website: N/A</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM SA 8AM-0PM</i></p>	<p><i>Board Certified Specialty: Yes</i>  <i>RADY CHILDRENS HEALTH NETWORK</i>   3605 VISTA WAY BLDG B            STE 130            OCEANSIDE, CA 92056   <i>Phone: (760) 547-1010</i>  <i>Fax: (760) 547-1011</i>   <i>After Hours Phone: (760) 547-1010</i>   <i>Website: N/A</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM SA 8AM-0PM</i></p>	<p> <i>After Hours Phone: (760) 631-5000</i>   <i>Website: www.vistacommunityclinic.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i></p>
<b>PEDIATRICS</b>		
<p><b>MACINTYRE, ELIZABETH</b>  <i>Provider ID: 543354</i></p>	<p><b>MCCAMMACK, BRADLEY</b>  <i>Provider ID: 206341</i>  <i>Provider Gender: Male</i>  <i>License Number: A130883</i>  <i>NPI: 1629368857</i>   <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: TRI CITY MEDICAL CTR</i>  <i>Board Certified Specialty: No</i></p>	<p><b>MCCAMMACK, BRADLEY</b>  <i>Provider ID: 206341</i>  <i>Provider Gender: Male</i>  <i>License Number: A130883</i>  <i>NPI: 1629368857</i>   <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: TRI CITY MEDICAL CTR</i>  <i>Board Certified Specialty: No</i>  <i>IHP OF SOUTHERN CAL-PHP</i>   4700 N RIVER RD            OCEANSIDE, CA 92057   <i>Phone: (760) 631-5000</i>  <i>Fax: (760) 414-3731</i>   <i>After Hours Phone: (760) 631-5000</i>   <i>Website: www.vistacommunityclinic.org</i></p>

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## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

---

### PEDIATRICS


#### **MCCAMMACK, BRADLEY**

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000  
Fax: (760) 414-3731

 After Hours Phone: (760) 631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

### PEDIATRICS

#### **MILLER, DONALD**

Provider ID: 433589


NPI: 1154356582



 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY BLDG B STE 130  
OCEANSIDE, CA 92056

 Phone: (760) 547-1010  
 After Hours Phone: (760) 547-1010

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### PEDIATRICS

#### **PARK, RONALD**

Provider ID: 271889

Provider Gender: Male

NPI: 1881695914

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767  
Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767



 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

---

### PEDIATRICS

#### **PERKINS, RACHEL**

Provider ID: 435952

Provider Gender: Female

NPI: 1427398320





 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

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## C. 初级保健目录



MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR, UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY STE 130  
BLDG B  
OCEANSIDE, CA 92056  
 Phone: (760) 547-1010  
 After Hours Phone: (760)  
547-1010  
 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### **PEDIATRICS**



#### **RONAN, KEVIN**

Provider ID: 206341





Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000  
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **PEDIATRICS**



#### **RONAN, KEVIN**







Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000  
 Website: www.vistacommunityclinic.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **PEDIATRICS**



#### **RONAN, KEVIN**

Provider ID: 206341


Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000  
 Website: www.vistacommunityclinic.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


nityclinic.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **PEDIATRICS**


#### **ZACHRY, ALISON**

Provider ID: 480247

Provider Gender: Female

License Number: A131678

NPI: 1922402858

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

### **PEDIATRICS**


#### **ZACHRY, ALISON**

Provider ID: 480247

Provider Gender: Female

License Number: A131678

NPI: 1922402858

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 966-3306

 After Hours Phone: (760)  
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054



 Phone: (760) 966-3306

 After Hours Phone: (760)







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## C. 初级保健目录







966-3306  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

**RUSSO, KRISTA**  
 Provider ID: 480247  
 Provider Gender: Female  
 License Number: PA53036  
 NPI: 1922471192  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 2210 MESA DR STE 300  
 OCEANSIDE, CA 92054  
 Phone: (760) 966-3306  
 After Hours Phone: (760) 966-3306  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER







### PHYSICIANS ASSISTANT



**RUSSO, KRISTA**  
 Provider ID: 480247  
 Provider Gender: Female  
 License Number: PA53036

NPI: 1922471192  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 2210 MESA DR STE 300  
 OCEANSIDE, CA 92054  
 Phone: (760) 966-3306  
 After Hours Phone: (760) 966-3306  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER








### POWAY

#### FAMILY PRACTICE

**KAUR, JATINDER**  
 Provider ID: 481187  
 Provider Gender: Female  
 License Number: A120771  
 NPI: 1912141391  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi, Urdu  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 13010 POWAY RD  
 POWAY, CA 92064  
 Phone: (858) 218-3000  
 After Hours Phone: (858) 218-3000  
 Website: N/A

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### FQHC


**NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,**  
 Provider ID: 481187  
 NPI: 1023518768  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 13010 POWAY RD  
 POWAY, CA 92064  
 Phone: (858) 218-3000  
 Fax: (360) 462-2742  
 After Hours Phone: (858) 218-3000  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE


**CAPARSO, AMANDA**  
 Provider ID: 602426  
 Provider Gender: Female  
 NPI: 1003046004


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## C. 初级保健目录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*

 13010 POWAY RD  
POWAY, CA 92064

 *Phone: (760) 737-6935*  
*Fax: (760) 741-2782*


 *After Hours Phone: (760) 737-6935*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **INTERNAL MEDICINE**

#### **WINE, DAVID**

*Provider ID: 612886*

*Provider Gender: Male*


*NPI: 1811985542*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*

*Board Certified Specialty: No*

#### **COMMUNITY CARE IPA LLC**

 15611 POMERADO RD STE 400

POWAY, CA 92064

 *Phone: (858) 675-3100*  
*Fax: (858) 487-4736*

 *After Hours Phone: (858) 675-3100*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**



#### **CURET, ZULMA**

*Provider ID: 481187*

*Provider Gender: Female*

*License Number: A119661*

*NPI: 1841561107*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 13010 POWAY RD  
POWAY, CA 92064

 *Phone: (858) 218-3000*

 *After Hours Phone: (858) 218-3000*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**

#### **LINDBACK, SARAH**

*Provider ID: 161834*

*Provider Gender: Female*

*NPI: 1427345487*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 15725 POMERADO RD STE 203

POWAY, CA 92064

 *Phone: (858) 673-3340*  
*Fax: (858) 673-1075*

 *After Hours Phone: (858) 673-3340*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*






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## C. 初级保健目录

<b>PEDIATRICS</b>		<b>PEDIATRICS</b>	
<b>LOSTETTER, ADRIENNE</b>	<i>Provider ID: 261797</i>	<i>Provider English Spoken: Y</i>	<i>Cultural Competency: N</i>
<i>Provider Gender: Female</i>	<i>NPI: 1881607984</i>	<i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH</i>	<i>Board Certified Specialty: No</i>
<i>Board Certified Specialty: No</i>	<i>RADY CHILDRENS HEALTH NETWORK</i>	<i>15725 POMERADO RD STE 203</i>	<i>POWAY, CA 92064</i>
<i>15725 POMERADO RD STE 203</i>	<i>POWAY, CA 92064</i>	<i>Phone: (858) 673-3340</i>	<i>Fax: (858) 673-1075</i>
<i>Phone: (858) 673-3340</i>	<i>Fax: (858) 673-1075</i>	<i>After Hours Phone: (858) 673-3340</i>	<i>Website: N/A</i>
<i>After Hours Phone: (858) 673-3340</i>	<i>Website: N/A</i>	<i>Medi-Cal Open Panel: Yes</i>	<i>Min/Max Age: 0\19</i>
<i>Website: N/A</i>	<i>Medi-Cal Open Panel: Yes</i>	<i>American Sign Language (ASL): N</i>	<i>Accessibility: CONTACT PROVIDER</i>
<i>Medi-Cal Open Panel: Yes</i>	<i>Min/Max Age: 0\19</i>	<i>American Sign Language (ASL): N</i>	<i>Hours: M-F 8AM-5PM</i>
<i>Min/Max Age: 0\19</i>	<i>American Sign Language (ASL): N</i>	<i>Accessibility: CONTACT PROVIDER</i>	
<i>American Sign Language (ASL): N</i>	<i>Accessibility: CONTACT PROVIDER</i>	<i>Hours: SU-SA 8AM-5PM</i>	
<i>Hours: M-F 8AM-5PM</i>			
<b>PEDIATRICS</b>		<b>PEDIATRICS</b>	
<b>MORTIMER, DORI</b>	<i>Provider ID: 230552</i>	<b>RAMGREN, AILEEN</b>	<i>Provider ID: 397707</i>
<i>Provider Gender: Female</i>	<i>NPI: 1417928417</i>	<i>Provider Gender: Female</i>	<i>NPI: 1356785505</i>
<i>Provider English Spoken: Y</i>	<i>Cultural Competency: N</i>	<i>Provider English Spoken: Y</i>	<i>Cultural Competency: N</i>
<i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND</i>	<i>Board Certified Specialty: No</i>	<i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i>	<i>Board Certified Specialty: No</i>
<i>15725 POMERADO RD STE 203</i>	<i>RADY CHILDRENS HEALTH NETWORK</i>	<i>15725 POMERADO RD STE 203</i>	<i>POWAY, CA 92064</i>
<i>POWAY, CA 92064</i>		<i>Phone: (858) 673-3340</i>	<i>Fax: (858) 673-1075</i>
<i>Phone: (858) 673-3340</i>		<i>After Hours Phone: (858) 673-3340</i>	<i>Website: N/A</i>
<i>After Hours Phone: (858) 673-3340</i>		<i>Medi-Cal Open Panel: Yes</i>	<i>Min/Max Age: 0\19</i>
<i>Website: N/A</i>		<i>American Sign Language (ASL): N</i>	<i>Accessibility: CONTACT PROVIDER</i>
<i>Medi-Cal Open Panel: Yes</i>		<i>American Sign Language (ASL): N</i>	<i>Hours: M-F 8AM-5PM</i>
<i>Min/Max Age: 0\19</i>			
<i>American Sign Language (ASL): N</i>			
<i>Accessibility: CONTACT PROVIDER</i>			
<i>Hours: M-F 8AM-5PM</i>			







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Phone: (858) 673-3340  
 After Hours Phone: (858) 673-3340  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **PEDIATRICS**








#### **RENDLER, NATHAN**

Provider ID: 30205  
 Provider Gender: Male  
 NPI: 1275531337  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hebrew, Spanish,  
 Yiddish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, PALOMAR HEALTH  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 15525 POMERADO RD STE 1  
 POWAY, CA 92064  
 Phone: (858) 487-8333  
 Fax: (858) 487-0856  
 After Hours Phone: (858)  
 487-8333  
 Website: N/A  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8:30AM-5PM  
 SA 9AM-5PM

### **PEDIATRICS**

#### **TAI, KUANGKAI**

Provider ID: 351834  
 Provider Gender: Male  
 NPI: 1396744066  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Chinese, Mandarin,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: PALOMAR  
 HEALTH, RADY CHILDRENS  
 HOSPITAL SAN DIEGO  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 15525 POMERADO RD STE  
 B1  
 POWAY, CA 92064  
 Phone: (858) 487-8333  
 Fax: (858) 487-0856  
 After Hours Phone: (858)  
 484-4003  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8:30AM-5PM  
 SA 8:30AM-0PM

### **PHYSICIANS ASSISTANT**

#### **BALDWIN, DONNA**

Provider ID: 481187  
 Provider Gender: Female  
 License Number: PA23310  
 NPI: 1649692369  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 13010 POWAY RD  
 POWAY, CA 92064  
 Phone: (858) 218-3000  
 After Hours Phone: (858)  
 218-3000  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-4:30PM

### **RAMONA**

#### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **DOAN, CHINH**

Provider ID: 449438  
 Provider Gender: Female  
 License Number: NP18874  
 NPI: 1083845069

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 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### FQHC



#### TRUECARE,






Provider ID: 449438  
NPI: 1245246917  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
Fax: (760) 736-8740  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### INTERNAL MEDICINE

#### YUNG, DORIS

Provider ID: 449438  
Provider Gender: Female  
License Number: A89893  
NPI: 1730386863  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin,  
Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS  
Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### ZACHRY, ALISON


Provider ID: 449438  
Provider Gender: Female

License Number: A131678  
NPI: 1922402858

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, TRI CITY MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### PHYSICIANS ASSISTANT






#### CHISWICK, GARY

Provider ID: 449438  
Provider Gender: Male  
License Number: PA22667  
NPI: 1174964001  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL  
Board Certified Specialty: No

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

#### **PHYSICIANS ASSISTANT**

### REIFENBERGER, JODY

Provider ID: 449438  
Provider Gender: Female  
License Number: PA22669  
NPI: 1386741072  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER





#### **PHYSICIANS ASSISTANT**



### RUSSO, KRISTA

Provider ID: 449438  
Provider Gender: Female  
License Number: PA53036  
NPI: 1922471192  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

#### **PHYSICIANS ASSISTANT**

### ZANGEN, ROCHELLE

Provider ID: 449438  
Provider Gender: Female  
License Number: PA51494  
NPI: 1447681150  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## SAN DIEGO



### **CARDIOVASCULAR DISEASE**

### GARIBYAN, VARTAN

Provider ID: 417937  
Provider Gender: Male  
License Number: 20A12504  
NPI: 1790084143  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
GREEN HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-9PM  
F 8AM-5PM*

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### **CERTIFIED NURSE PRACTITIONER**


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#### **ALVAREZ, LISA**

*Provider ID: 206363*  
*Provider Gender: Female*  
*License Number: NP19911*  
*NPI: 1417262718*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP  
CHULA VISTA MED CTR*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *4725 MARKET ST  
SAN DIEGO, CA 92102*  
 *Phone: (619) 515-2560*  
 *After Hours Phone: (619)  
515-2560*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **AQUINO, FELINO**



*Provider ID: 432308*  
*Provider Gender: Male*


*License Number: NP22974*  
*NPI: 1356684781*

 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Tagalog*

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*OPERATION SAMAHAN*

 *9855 ERMA RD STE 105  
SAN DIEGO, CA 92131*

 *Phone: (844) 200-2426*  
 *After Hours Phone: (844)  
200-2426*

 *Website: www.operationsa  
mahan.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*



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### **CERTIFIED NURSE PRACTITIONER**

---

#### **AQUINO, FELINO**



*Provider ID: 418535*  
*Provider Gender: Male*  
*License Number: NP22974*  
*NPI: 1356684781*


 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Tagalog*

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*OPERATION SAMAHAN*

 *9995 CARMEL MOUNTAIN  
RD STE B10 AND B11*

*SAN DIEGO, CA 92129*


 *Phone: (844) 200-2426*  
 *After Hours Phone: (844)  
200-2426*

 *Website: www.operationsa  
mahan.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM*

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### **CERTIFIED NURSE PRACTITIONER**

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#### **ARTS, SERENA**

*Provider ID: 403583*  
*Provider Gender: Female*  
*License Number: NP10769*  
*NPI: 1801881552*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 *1501 IMPERIAL AVE  
SAN DIEGO, CA 92101*

 *Phone: (619) 233-8500*  
 *After Hours Phone: (619)  
233-8500*

 *Website: N/A*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**BELEN, NEZER**

*Provider ID: 206363*

*Provider Gender: Male*


*License Number: NP95009292*


*NPI: 1386120723*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 4725 MARKET ST  
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*


 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**BELTRON, KIMBERLY**

*Provider ID: 403583*

*Provider Gender: Female*


*License Number: NP95020497*


*NPI: 1871295493*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM*

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**BESTERFELDT, LYDIA**

*Provider ID: 482070*

*Provider Gender: Female*


*License Number: NP95013060*


*NPI: 1265929442*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*


 *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

*8:30AM-5:30PM*

*SA 9AM-4PM*

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**BURNS, DELLA**

*Provider ID: 233597*

*Provider Gender: Female*


*License Number: NP7413*


*NPI: 1871577023*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**

 4290 POLK AVE  
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

 *After Hours Phone: (619) 563-0250*

 *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**CELESTIN-RAMSEY, AKANKE**

*Provider ID: 451167*

*Provider Gender: Female*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

License Number: NP8563


NPI: 1447450275


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4PM

### CERTIFIED NURSE PRACTITIONER


#### **CHASE, AVA LOU**

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **DHARKAR-SURBER, SAPNA**

Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)  
255-9155


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 8AM-2PM

### CERTIFIED NURSE PRACTITIONER

#### **DO, ELAINE**

Provider ID: 233532

Provider Gender: Female

License Number: NP95019446

NPI: 1215696307


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)  
280-2058

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes


Min/Max Age: 0\22

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **GALLEGOS, CYNTHIA**

Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **GARCIA, JOHNNY**

Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **GOLDFINGER, SARAH**

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313


NPI: 1134686744


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **HA, THU**

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)

279-0925

Website: [www.sdfamilycare](http://www.sdfamilycare.org)

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

### CERTIFIED NURSE

### PRACTITIONER

### HA, THU

Provider ID: 482070

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

N

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)

810-8700

Website: [www.sdfamilycare](http://www.sdfamilycare.org)

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

### CERTIFIED NURSE

### PRACTITIONER

### HARRINGTON, BARBARA

### LORRAINE

Provider ID: 185268

Provider Gender: Female

License Number: NP17008

NPI: 1659579134

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)

255-9155

Website: [www.lamaestra.or](http://www.lamaestra.org)

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 8AM-2PM

### CERTIFIED NURSE

### PRACTITIONER

### HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)

200-2426

Website: [www.operationsa](http://www.operationsamahan.org)

mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-4:30PM

### CERTIFIED NURSE

### PRACTITIONER

### HILLIARD, THESALONICA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 417101  
 Provider Gender: Female  
 License Number: NP95010585  
 NPI: 1861956724

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Tagalog  
 Cultural Competency: N  
 Board Certified Specialty: No  
 OPERATION SAMAHAN

10737 CAMINO RUIZ STE  
 235  
 SAN DIEGO, CA 92126  
 Phone: (844) 200-2426  
 After Hours Phone: (844)  
 200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT  
 PROVIDER

Hours: M-F 8AM-4:30PM

### CERTIFIED NURSE PRACTITIONER

#### **HOANG, CHI**

Provider ID: 482070  
 Provider Gender: Female  
 License Number: NP95004600  
 NPI: 1902350994

Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858)  
 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **HOGAN, ROSELYNN JOY**

Provider ID: 206360  
 Provider Gender: Female  
 License Number: NP17852  
 NPI: 1205019510

Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

#### PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **HORNEY, KRISTAN**

Provider ID: 403583  
 Provider Gender: Female  
 License Number: NP95007712  
 NPI: 1720590904

Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619)  
 233-8500

Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5:30PM

### CERTIFIED NURSE PRACTITIONER

#### **INSTONE, SUSAN**

Provider ID: 482070  
 Provider Gender: Female  
 License Number: NP4858  
 NPI: 1710223268

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 *Phone: (858) 810-8700*  
 *After Hours Phone: (858) 810-8700*  
 *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*



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### **CERTIFIED NURSE PRACTITIONER**

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#### **INSTONE, SUSAN**

*Provider ID: 233532*  
*Provider Gender: Female*  
*License Number: NP4858*  
*NPI: 1710223268*



 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4305 UNIVERSITY AVE STE

150  
 SAN DIEGO, CA 92105  
 *Phone: (619) 280-2058*  
 *After Hours Phone: (619) 280-2058*  
 *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\22*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-2PM*



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### **CERTIFIED NURSE PRACTITIONER**

---

#### **JOHNSON, SHAWNA AKIKO**

*Provider ID: 233597*  
*Provider Gender: Female*  
*License Number: NP95002518*  
*NPI: 1922237809*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4290 POLK AVE  
 SAN DIEGO, CA 92105  
 *Phone: (619) 563-0250*  
 *After Hours Phone: (619) 563-0250*  
 *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*



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### **CERTIFIED NURSE PRACTITIONER**




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#### **KEMP, KATHRINE**

*Provider ID: 403583*  
*Provider Gender: Female*  
*License Number: NP95018497*  
*NPI: 1316615313*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101  
 *Phone: (619) 233-8500*  
 *After Hours Phone: (619) 233-8500*

 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM*

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **KHAN, MATTHEW**

*Provider ID: 417987*  
*Provider Gender: Male*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


License Number: NP17838


NPI: 1942456124

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)  
515-2426

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**KI, TRISH**

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: www.sdfamilycare  
.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


**KI, TRISH**


Provider ID: 482070

Provider Gender: Female

License Number: NP23847

NPI: 1376840199


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)  
810-8700

 Website: www.sdfamilycare  
.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**KI, TRISH**

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: www.sdfamilycare  
.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **KLOBERDANZ, KELSEY**

Provider ID: 417937


Provider Gender: Female

License Number: NP95005293


NPI: 1235672502


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

### **LENNON, RYAN**

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593


NPI: 1558084855


Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 2204 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2355

 After Hours Phone: (619)  
515-2355

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

### **LIEBER, CAROL**

Provider ID: 517403

Provider Gender: Female

License Number: NP20849


NPI: 1487889846

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 238-5551

 After Hours Phone: (619)  
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

### **LIM, IMELDA**

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y


Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No  
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426


 Website: www.operationsa  
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

### **CERTIFIED NURSE PRACTITIONER**

### **LU, TAMMY**

Provider ID: 206360

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: NP95007253  
NPI: 1457879132

☐ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)  
515-2300

🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **MARTIN, RIA**

Provider ID: 206363

Provider Gender: Female

License Number: NP95005321

NPI: 1437695079

☐ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 4725 MARKET ST  
SAN DIEGO, CA 92102

☎ Phone: (619) 515-2560

🕒 After Hours Phone: (619)  
515-2560

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **MARTINEZ, CAROLYN**

Provider ID: 214492

Provider Gender: Female

License Number: NP22031

NPI: 1609101997

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 1016 OUTER RD  
SAN DIEGO, CA 92154

☎ Phone: (619) 429-3733

🕒 After Hours Phone: (619)  
429-3733

🌐 Website: www.ibclinic.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M 8:30AM-5PM  
TU-TH 8:30AM-8PM  
F 8:30AM-5PM

### CERTIFIED NURSE

### PRACTITIONER

#### **MELTZER, VIRGINIA**

Provider ID: 233532

Provider Gender: Female

License Number: NP95015948

NPI: 1821684390

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

🕒 After Hours Phone: (619)  
280-2058

🌐 Website: www.sdfamilycare  
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-2PM

### CERTIFIED NURSE PRACTITIONER

#### **MENDOZA, GRETTEL MARIE**

Provider ID: 417101

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


License Number: NP95002233  
NPI: 1245652387


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **MORAN, TIFFANY**

Provider ID: 207382

Provider Gender: Female

License Number: NP95011037


NPI: 1730730649


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)  
234-2158


 Website: [WWW.SDAIHC.ORG](http://WWW.SDAIHC.ORG)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

Indian Health Services: Y

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **NEVAREZ, IRENE**

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Board Certified Specialty: No


LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)  
564-8765


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 8AM-2PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **NGUYEN, NINA**

Provider ID: 417101

Provider Gender: Female

License Number: NP95020179


NPI: 1417699869


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-4:30PM

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **NOCEDA, ANA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Provider ID: 233532

Provider Gender: Female

License Number: NP19505

NPI: 1386971760


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105

 Phone: (619) 280-2058


 After Hours Phone: (619)  
280-2058


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### CERTIFIED NURSE PRACTITIONER

---


#### **NOCEDA, ANA**


Provider ID: 482070

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)  
810-8700


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

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### CERTIFIED NURSE PRACTITIONER

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#### **OCAMPO, ELAINE**

Provider ID: 482070

Provider Gender: Female

License Number: NP95003427


NPI: 1063856805


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin, Yue  
Chinese


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)  
810-8700

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### CERTIFIED NURSE PRACTITIONER

---



#### **OCAMPO, ELAINE**

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427


NPI: 1063856805


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin, Yue  
Chinese

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **OCAMPO, ELAINE**

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y


Provider Language(s)  
Spoken: Mandarin, Yue  
Chinese


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **ODA, THAGHAR**

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692


Provider English Spoken: Y


Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **ODA, THAGHAR**

Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692


Provider English Spoken: Y


Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **ODA, THAGHAR**

Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692


Provider English Spoken: Y


Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): License Number: NP95003211  
NPI: 1790785988

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **ODA, THAGHAR**


Provider ID: 206363

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE PRACTITIONER**


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#### **ORPILLA, IMELDA**

Provider ID: 417101

Provider Gender: Female

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No


OPERATION SAMAHAN

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4:30PM

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### **CERTIFIED NURSE PRACTITIONER**

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#### **ORPILLA, IMELDA**

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)  
200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **OWEN, MICHAEL**

Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes































Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>PADILLA, MICHELE</b> <i>Provider ID: 403583</i> <i>Provider Gender: Female</i> <i>License Number: NP95020636</i> <i>NPI: 1356083828</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101</p> <p> <i>Phone: (619) 233-8500</i></p> <p> <i>After Hours Phone: (619) 233-8500</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5:30PM</i></p> <hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>PATIAG, DANIEL</b> <i>Provider ID: 206046</i> <i>Provider Gender: Male</i> <i>License Number: NP95012511</i> <i>NPI: 1073169769</i></p> <p> <i>Provider English Spoken: Y</i></p>	<p> <i>Provider Language(s) Spoken: Tagalog</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 6973 LINDA VISTA RD SAN DIEGO, CA 92111</p> <p> <i>Phone: (858) 279-0925</i></p> <p> <i>After Hours Phone: (858) 279-0925</i></p> <p> <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>PATIAG, DANIEL</b> <i>Provider ID: 482070</i> <i>Provider Gender: Male</i> <i>License Number: NP95012511</i> <i>NPI: 1073169769</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Tagalog</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111</p> <p> <i>Phone: (858) 810-8700</i></p> <p> <i>After Hours Phone: (858)</i></p>	<p>810-8700</p> <p> <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M 8:30AM-5:30PM</i> <i>TU 8:30AM-8:30PM</i> <i>W-F 8:30AM-5:30PM</i> <i>SA 9AM-4PM</i></p> <hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>PATIAG, DANIEL</b> <i>Provider ID: 206046</i> <i>Provider Gender: Male</i> <i>License Number: NP95012511</i> <i>NPI: 1073169769</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Tagalog</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 6973 LINDA VISTA RD SAN DIEGO, CA 92111</p> <p> <i>Phone: (858) 279-0925</i></p> <p> <i>After Hours Phone: (858) 279-0925</i></p> <p> <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录






 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5:30PM*

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### **CERTIFIED NURSE PRACTITIONER**

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#### **PERRY, KATHERINE**

*Provider ID: 207382*  
*Provider Gender: Female*  
*License Number: NP95014964*  
*NPI: 1215543426*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 2630 1ST AVE  
 SAN DIEGO, CA 92103  
 *Phone: (619) 234-2158*  
 *After Hours Phone: (619) 234-2158*  
 *Website: WWW.SDAIHC.ORG*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
*Indian Health Services: Y*

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### **CERTIFIED NURSE PRACTITIONER**

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#### **QUINTO, CINDY**




*Provider ID: 233532*  
*Provider Gender: Female*


*License Number: NP16433*  
*NPI: 1902810377*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: French, Lao, Spanish*



*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4305 UNIVERSITY AVE STE 150  
 SAN DIEGO, CA 92105  
 *Phone: (619) 280-2058*  
 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\22*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-2PM*


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### **CERTIFIED NURSE PRACTITIONER**


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#### **QUINTO, CINDY**

*Provider ID: 482070*  
*Provider Gender: Female*  
*License Number: NP16433*  
*NPI: 1902810377*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French, Lao, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 *Phone: (858) 810-8700*  
 *After Hours Phone: (858) 810-8700*  
 *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

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### **CERTIFIED NURSE PRACTITIONER**



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#### **REID, EMILY**

*Provider ID: 185268*  
*Provider Gender: Female*  
*License Number: NP95002766*  
*NPI: 1083081467*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*LA MAESTRA FAMILY CLINIC*

 4060 FAIRMOUNT AVE  
 SAN DIEGO, CA 92105  
 *Phone: (619) 255-9155*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 After Hours Phone: (619)  
255-9155

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **ROGERS, TANYA**

Provider ID: 417987

Provider Gender: Female


License Number: NP95004443


NPI: 1558710038

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)  
515-2426

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE

### PRACTITIONER


#### **SABIN, NANCY**

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM  
TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM

### CERTIFIED NURSE PRACTITIONER

#### **SABIN, NANCY**

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM  
TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM

### CERTIFIED NURSE PRACTITIONER

#### **SABIN, NANCY**


Provider ID: 482070

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858) 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM

W-F 8:30AM-5:30PM  
SA 9AM-4PM

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### CERTIFIED NURSE PRACTITIONER

#### **SAMPSON, ANDRIECE**

Provider ID: 207382

Provider Gender: Female


License Number: NP95026377


NPI: 1619594124

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE  
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619) 234-2158

 Website: [WWW.SDAIHC.ORG](http://WWW.SDAIHC.ORG)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

Indian Health Services: Y

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### CERTIFIED NURSE PRACTITIONER

#### **SANTANGELO, JOANNE**

Provider ID: 482070

Provider Gender: Female


License Number: NP2390


NPI: 1619370475

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858) 810-8700

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM

W-F 8:30AM-5:30PM  
SA 9AM-4PM

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### CERTIFIED NURSE PRACTITIONER

#### **SANTANGELO, JOANNE**

Provider ID: 206046

Provider Gender: Female


License Number: NP2390


NPI: 1619370475


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM  
TU 8AM-8PM

W-F 8AM-5PM  
SA 9AM-1PM

---

### CERTIFIED NURSE PRACTITIONER

#### **SANTANGELO, JOANNE**

Provider ID: 206046

Provider Gender: Female

License Number: NP2390

NPI: 1619370475

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-5PM  
 TU 8AM-8PM  
 W-F 8AM-5PM  
 SA 9AM-1PM

### CERTIFIED NURSE PRACTITIONER



#### **SATTERWHITE, MAURINE**

Provider ID: 206046  
 Provider Gender: Female  
 License Number: NP7022  
 NPI: 1225012842

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-5PM  
 TU 8AM-8PM  
 W-F 8AM-5PM  
 SA 9AM-1PM

### CERTIFIED NURSE PRACTITIONER



#### **SATTERWHITE, MAURINE**

Provider ID: 482070  
 Provider Gender: Female  
 License Number: NP7022  
 NPI: 1225012842

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858)  
 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F

8:30AM-5:30PM  
 SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER



#### **SATTERWHITE, MAURINE**

Provider ID: 206046  
 Provider Gender: Female  
 License Number: NP7022  
 NPI: 1225012842

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-5PM  
 TU 8AM-8PM  
 W-F 8AM-5PM  
 SA 9AM-1PM

### CERTIFIED NURSE PRACTITIONER

#### **SAVILLE, EDITH**

Provider ID: 417937

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female


License Number: NP7374


NPI: 1730567678


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 4094 4TH AVE  
SAN DIEGO, CA 92103


 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **SEAMAN, MARY**

Provider ID: 206363

Provider Gender: Female


License Number: NP10146


NPI: 1033116652


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **SEBRING, JAN**

Provider ID: 206360

Provider Gender: Female


License Number: NP10906


NPI: 1295750339


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE

### PRACTITIONER

#### **SEBRING, JAN**

Provider ID: 206360

Provider Gender: Female


License Number: RN486421


NPI: 1295750339


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### **TAYLOR, KAYLA**

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792

NPI: 1730604414


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


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### **CERTIFIED NURSE PRACTITIONER**


---

#### **TAYLOR, KAYLA**


Provider ID: 206362  
Provider Gender: Female  
License Number: NP95006792  
NPI: 1730604414

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



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### **CERTIFIED NURSE PRACTITIONER**

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#### **TODD, MIKAYLA**


Provider ID: 517998  
Provider Gender: Female  
License Number: NP95005999  
NPI: 1316478092

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



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### **CERTIFIED NURSE PRACTITIONER**




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#### **TRAN, KELLY**

Provider ID: 206360  
Provider Gender: Female  
License Number: NP95003689  
NPI: 1255799276

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



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### **CERTIFIED NURSE PRACTITIONER**




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#### **TUEROS, VICTORIA**

Provider ID: 206360  
Provider Gender: Female  
License Number: NP2286  
NPI: 1598989261

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95011254  
N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **VEGA, TERESA**

Provider ID: 206360

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95011254  
N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **VELASQUEZ, FERNANDO**

Provider ID: 206360

Provider Gender: Male

License Number: NP95011254  
NPI: 1386195535


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95011254  
N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **VELASQUEZ, FERNANDO**

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254  
NPI: 1386195535

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

 2325 COMMERCIAL ST STE  
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)  
515-2422

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95011254  
N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **VILLALOBOS, REBECA**

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes































Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95011254

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b><u>CERTIFIED NURSE PRACTITIONER</u></b></p> <p><b>WEICKERT, MARIA</b> <i>Provider ID: 417429</i> <i>Provider Gender: Female</i> <i>License Number: NP95010814</i> <i>NPI: 1841758984</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 1550 BROADWAY STE 2 SAN DIEGO, CA 92101</p> <p> <i>Phone: (619) 515-2525</i>  <i>After Hours Phone: (619) 515-2525</i></p> <p> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p><b><u>CERTIFIED NURSE PRACTITIONER</u></b></p> <p><b>WILLIAMS, TAKISHA</b> <i>Provider ID: 402851</i> <i>Provider Gender: Female</i> <i>License Number: NP95013978</i></p>	<p><i>NPI: 1881727386</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 3705 MISSION BLVD SAN DIEGO, CA 92109</p> <p> <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i></p> <p> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b><u>CERTIFIED NURSE PRACTITIONER</u></b></p> <p><b>WILLIAMS, TAKISHA</b> <i>Provider ID: 416831</i> <i>Provider Gender: Female</i> <i>License Number: NP95013978</i> <i>NPI: 1881727386</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 3514 30TH ST SAN DIEGO, CA 92104</p>	<p> <i>Phone: (619) 515-2424</i>  <i>After Hours Phone: (619) 515-2424</i></p> <p> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b><u>CERTIFIED NURSE PRACTITIONER</u></b></p> <p><b>WILLIAMS, BREAHA</b> <i>Provider ID: 185268</i> <i>Provider Gender: Female</i> <i>License Number: NP95001840</i> <i>NPI: 1063884864</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>LA MAESTRA FAMILY CLINIC</i></p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105</p> <p> <i>Phone: (619) 255-9155</i>  <i>After Hours Phone: (619) 255-9155</i></p> <p> <i>Website: www.lamaestra.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-6PM</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SA 8AM-2PM

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### **CERTIFIED NURSE PRACTITIONER**

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#### **WOLF, CELIA**

Provider ID: 417937

Provider Gender: Female


License Number: NP95001899


NPI: 1245635564

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **BOSTON, LAURA**

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **GEPSHTEIN, YANA**

Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

Provider English Spoken: Y


Provider Language(s)  
Spoken: Hebrew


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **TOLMIE, SIMONE**

Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence  
Santa Rosa Memorial Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **CHIROPRACTOR**

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## C. 初级保健目录

### ASSADIAN, MEHRAK

Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

Provider English Spoken: Y

Provider Language(s)  
Spoken: Turkish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE  
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

### CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4:30PM

### CHIROPRACTOR

### CABALLERO, JAMES

Provider ID: 418535

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

### CHIROPRACTOR

### GILBERTO, JOSEPH

Provider ID: 418535

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

### CHIROPRACTOR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **GILIBERTO, JOSEPH**

Provider ID: 417101

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4:30PM

### **CHIROPRACTOR**

### **HALEY, STEVEN**

Provider ID: 185268

Provider Gender: Male

License Number: DC25697

NPI: 1083764484

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)  
280-4213

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **CHIROPRACTOR**

### **HOURIHAN, KEITH**

Provider ID: 185268

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)  
280-4213

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **CHIROPRACTOR**

### **ILCHENA, ALESANDRA**

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)  
798-3947

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **CHIROPRACTOR**

### **KAZEM, AHMAD**

Provider ID: 227409

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)  
Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM

W 10AM-7PM  
TH-F 8:30AM-5:30PM

### CHIROPRACTOR

#### OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3705 MISSION BLVD  
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)  
515-2444

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-9PM  
F 8AM-5PM

### CHIROPRACTOR

#### ROJAS, RICHARD

Provider ID: 417937

Provider Gender: Male

License Number: DC31024

NPI: 1538318811

Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

### **CHIROPRACTOR**

**SOSA, DAVID**

Provider ID: 417937

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **CHIROPRACTOR**

**SOSA, DAVID**

Provider ID: 206363

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)  
515-2560

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **CHIROPRACTOR**

**SU, VENNES**

Provider ID: 417101

Provider Gender: Female

License Number: DC34907

NPI: 1053919928

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4:30PM

### **CLINIC OUTPATIENT**

**OPERATION SAMAHAN**

**RANCHO PENASQUITOS,**

Provider ID: 418535

NPI: 1699216622

Provider English Spoken: Y  
Cultural Competency: N

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN  
RD STE B10 AND B11

SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)  
200-2426

Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): **CARTER, NATASHA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

---

### **DERMATOLOGY**

**BURROWS, WILLIAM**

Provider ID: 417937

Provider Gender: Male

License Number: G16236


NPI: 1639199292


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---



### **DERMATOLOGY**

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

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### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

**AHMAD, AAKIF**

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,


SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

---

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

**CARRILLO, MARITZA**

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-7PM  
TU-TH 8AM-6PM  
F 8AM-5:30PM

#### **ENDOCRINOLOGY METABOLISM DIABETES**

#### **CHANG, AMY**

Provider ID: 206360  
Provider Gender: Female  
License Number: A93385  
NPI: 1750568911

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

#### **ENDOCRINOLOGY METABOLISM DIABETES**

#### **GANDHI, ANAND**

Provider ID: 206360  
Provider Gender: Male  
License Number: A178494  
NPI: 1821651779

Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
Fax: (619) 515-2510

After Hours Phone: (619) 515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

#### **ENDOCRINOLOGY METABOLISM DIABETES**

#### **ISLAM, JULIE**

Provider ID: 206363  
Provider Gender: Female  
License Number: A149552  
NPI: 1750780516

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560  
After Hours Phone: (619) 515-2560

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

#### **ENDOCRINOLOGY METABOLISM DIABETES**

#### **LEVINE, MATTHEW**


Provider ID: 206360  
Provider Gender: Male  
License Number: A77126  
NPI: 1801994231






Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 *Phone: (619) 515-2300*  
 *After Hours Phone: (619) 515-2300*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*





### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

#### **NAGELBERG, JODI**



*Provider ID: 206360*  
*Provider Gender: Female*  
*License Number: A146838*  
*NPI: 1720474141*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*






 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*  
 *After Hours Phone: (619) 515-2300*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**



#### **ABDALLAH, ALI**







*Provider ID: 206363*  
*Provider Gender: Male*  
*License Number: 20A15471*  
*NPI: 1649699968*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Arabic*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 *Phone: (619) 515-2560*  
 *After Hours Phone: (619) 515-2560*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**  
*Provider ID: 227409*  
*Provider Gender: Male*  
*License Number: A157505*  
*NPI: 1588197826*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: <https://www.syhealth.org/locations>*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*


### **FAMILY PRACTICE**

#### **BACHARACH, REBECCA**


*Provider ID: 417937*  
*Provider Gender: Female*  
*License Number: 20A15459*  
*NPI: 1225442643*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103


 Phone: (619) 515-2545


 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **FAMILY PRACTICE**

#### **BAGINGITO, AUSTIN**

Provider ID: 417429


Provider Gender: Male


License Number: A163977


NPI: 1942705637

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

 Phone: (619) 515-2525


 After Hours Phone: (619)  
515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N  
NPI: 1588141865

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **FAMILY PRACTICE**



#### **BAHRAMZI, MARIA**

Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE  
SAN DIEGO, CA 92105


 Phone: (619) 515-2426

 After Hours Phone: (619)  
515-2426

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



### **FAMILY PRACTICE**

#### **BAHRAMZI, MARIA**

Provider ID: 206362

Provider Gender: Female

License Number: A173486  
NPI: 1588141865

 Provider English Spoken: Y  
 Provider Language(s)


Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**



#### **BAHRAMZI, MARIA**

Provider ID: 206362

Provider Gender: Female

License Number: A173486


NPI: 1588141865

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Pashto

Cultural Competency: N





Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

**BAIN, NATALIE**  
Provider ID: 206360  
Provider Gender: Female  
License Number: A183464  
NPI: 1821677584  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619) 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER


### FAMILY PRACTICE

**BAUTISTA, LUIS**  
Provider ID: 517403  
Provider Gender: Male  
License Number: A97270  
NPI: 1295712206

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation:

COMMUNITY REGIONAL  
MEDICAL CENTER-FRESNO,  
ST AGNES MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 316 25TH ST  
SAN DIEGO, CA 92102  
 Phone: (619) 238-5551  
 After Hours Phone: (619) 238-5551




 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

**BISHOP, MELISSA**  
Provider ID: 403583  
Provider Gender: Female  
License Number: C137521  
NPI: 1578667077





Provider English Spoken: Y  
 Provider Language(s)

Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 645-6405  
 After Hours Phone: (619) 645-6405

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM

### FAMILY PRACTICE

**BODIFORD, SAMANTHA**  
Provider ID: 214492  
Provider Gender: Female  
License Number: A165398  
NPI: 1730684200  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD  
SAN DIEGO, CA 92154  
 Phone: (619) 429-3733  
 After Hours Phone: (619) 429-3733  
 Website: [www.ibclinic.org](http://www.ibclinic.org)  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5PM  
TU-TH 8:30AM-8PM  
F 8:30AM-5PM

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### **FAMILY PRACTICE**

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#### **BORTNER, ADAM**

Provider ID: 206363

Provider Gender: Male

License Number: A164879

NPI: 1811491749

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

---

#### **BRADY, PATRICIA**

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W 8:30AM-5PM  
TH 8:30AM-9PM

F 8:30AM-5PM

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### **FAMILY PRACTICE**

---

#### **BRODSKY, MARK**

Provider ID: 402851

Provider Gender: Male

License Number: C53623

NPI: 1346337904


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W  
8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

---

### **FAMILY PRACTICE**

---

#### **BURTON, LUCAS**

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

---

### FAMILY PRACTICE

---


#### BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

---

### FAMILY PRACTICE


---

#### CAMPBELL, BRIANNA

Provider ID: 451167

License Number: A157488

NPI: 1316479892

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

### FAMILY PRACTICE

---


#### CARRIEDO-CENICEROS, MARIA

Provider ID: 227409

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

### FAMILY PRACTICE

---

#### CHOU, BILL

Provider ID: 206362

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

---

### **FAMILY PRACTICE**

---

#### **CHOU, BILL**

*Provider ID: 417937*

*Provider Gender: Male*


*License Number: 20A14794*


*NPI: 1730448101*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 4094 4TH AVE  
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*


 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### **FAMILY PRACTICE**

---

#### **CHOU, BILL**

*Provider ID: 206362*

*Provider Gender: Male*

*License Number: 20A14794*


*NPI: 1730448101*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF**

#### **SAN DIEGO**

 3544 30TH ST  
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### **FAMILY PRACTICE**

---


#### **CHUN, HYUN**

*Provider ID: 206360*

*Provider Gender: Male*

*License Number: A163978*

*NPI: 1083118988*


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### **FAMILY PRACTICE**

---

#### **COLLINS, WILLIAM**

*Provider ID: 417937*

*Provider Gender: Male*

*License Number: 20A15413*

*NPI: 1417361973*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA*


**JOLLA JOHN SALLY**


**THORNTON**

*Board Certified Specialty: No*

**FAMILY HEALTH CENTERS OF SAN DIEGO**

 4094 4TH AVE  
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*


 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU-SA 8AM-9PM*

---

### **FAMILY PRACTICE**

---

#### **COLLINS, WILLIAM**

*Provider ID: 206362*


*Provider Gender: Male*

*License Number: 20A15413*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



NPI: 1417361973

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: SU-SA  
8:30AM-5:30PM

### **FAMILY PRACTICE**


#### **COLLINS, WILLIAM**

Provider ID: 206362  
Provider Gender: Male  
License Number: 20A15413  
NPI: 1417361973



 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: SU-SA  
8:30AM-5:30PM


### **FAMILY PRACTICE**

#### **CORMAN, DANIEL**

Provider ID: 402851  
Provider Gender: Male  
License Number: 20A13060  
NPI: 1629339593

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619)  
515-2444  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes







Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **DAPPEN, AMANDA**

Provider ID: 227409  
Provider Gender: Female  
License Number: A153414  
NPI: 1689037111

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [https://www.syhe  
alth.org/locations](https://www.syhealth.org/locations)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **DAVIS, DEIRDRE**

Provider ID: 451167  
Provider Gender: Female  
License Number: A165432  
NPI: 1265921365

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 950 S EUCLID AVE  
 SAN DIEGO, CA 92114  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-4PM

### **FAMILY PRACTICE**

#### **FAMBRO, CYNTHIA**

Provider ID: 451167  
 Provider Gender: Female  
 License Number: A153223  
 NPI: 1710331707  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 950 S EUCLID AVE  
 SAN DIEGO, CA 92114  
 Phone: (619) 662-4100

After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **FLORES, JOE**

Provider ID: 417937  
 Provider Gender: Male  
 License Number: A171135  
 NPI: 1033647409  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
 515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-9PM  
 F 8AM-5PM

### **FAMILY PRACTICE**

#### **GLEASON ROHRER, GWEN**

Provider ID: 233597  
 Provider Gender: Female  
 License Number: A112176  
 NPI: 1710140462  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4290 POLK AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 563-0250  
 After Hours Phone: (619)  
 563-0250  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**





#### **GLEASON ROHRER, GWEN**


Provider ID: 233532  
 Provider Gender: Female  
 License Number: A112176  
 NPI: 1710140462  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。










## C. 初级保健目录

*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
**MEDICAL CTR**  
*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**  
 4305 UNIVERSITY AVE STE 150  
SAN DIEGO, CA 92105  
 Phone: (619) 280-2058  
 After Hours Phone: (619) 280-2058  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\22*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

**GRIFFITHS, KENNETH**  
*Provider ID: 417937*  
*Provider Gender: Male*  
*License Number: C52451*  
*NPI: 1760563068*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
**MEDICAL CTR**  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)

515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-9PM F 8AM-5PM*



### **FAMILY PRACTICE**

**GUTIERREZ, TANIA**  
*Provider ID: 417987*  
*Provider Gender: Female*  
*License Number: 20A19345*  
*NPI: 1285196311*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
 4874 POLK AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 515-2426  
 After Hours Phone: (619) 515-2426  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5:30PM*

### **FAMILY PRACTICE**

**HACHOLSKI, MARK**  
*Provider ID: 206362*  
*Provider Gender: Male*  
*License Number: A169591*  
*NPI: 1568995694*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

**HACHOLSKI, MARK**  
*Provider ID: 206362*  
*Provider Gender: Male*  
*License Number: A169591*  
*NPI: 1568995694*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

**HAMILTON, LISA MARIE**

Provider ID: 418142

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

5160 FEDERAL BLVD  
SAN DIEGO, CA 92105

Phone: (619) 515-2454

After Hours Phone: (619)  
515-2454

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### FAMILY PRACTICE

**HAMILTON, LISA MARIE**

Provider ID: 206363

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)  
515-2560

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### FAMILY PRACTICE

**HEINRICI, ALEKA**

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE  
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-4PM

### FAMILY PRACTICE

**HENDRIX, JEFFERSON**

Provider ID: 631494

Provider Gender: Male

License Number: A32571

NPI: 1235142738

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP





1666 PRECISION PARK LN


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## C. 初级保健目录

SAN DIEGO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**KAUFHOLD, ANNE**  
 Provider ID: 227409  
 Provider Gender: Female  
 License Number: A88893  
 NPI: 1164508073  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 3177 OCEAN VIEW BLVD  
 SAN DIEGO, CA 92113  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: <https://www.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**KAUFMAN, JENNIFER CHILYN**  
 Provider ID: 417987  
 Provider Gender: Female  
 License Number: G149974  
 NPI: 1407818768  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Mandarin  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF SAN DIEGO  
 4874 POLK AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 515-2426  
 After Hours Phone: (619) 515-2426  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

### **FAMILY PRACTICE**

**KEFLEZIGHI, BAHGHI**  
 Provider ID: 206363  
 Provider Gender: Female  
 License Number: A100391

NPI: 1124210844  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF SAN DIEGO  
 4725 MARKET ST  
 SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 Fax: (619) 263-2499  
 After Hours Phone: (619) 515-2560  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**KIDDER, BRENDAN**  
 Provider ID: 227409  
 Provider Gender: Male  
 License Number: A112379  
 NPI: 1275793929  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**LACH, REBECCA**

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **FAMILY PRACTICE**

**LACH, REBECCA**

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**LACH, REBECCA**

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**LEE, SANDRINE**

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

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#### **LEE, SANDRINE**

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y


Provider Language(s)  
Spoken: French


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

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#### **LINDEMAN, KURTIS**

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### **FAMILY PRACTICE**

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#### **LISH, JONATHAN**

Provider ID: 206360

Provider Gender: Male

License Number: A177373


NPI: 1811459456


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

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#### **LIU, JIE**

Provider ID: 206362

Provider Gender: Female

License Number: A147758

NPI: 1780066472

Provider English Spoken: Y


Provider Language(s)  
Spoken: Chinese, Mandarin,  
Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**


#### **LIU, JIE**


Provider ID: 206362

Provider Gender: Female

License Number: A147758

NPI: 1780066472

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Chinese, Mandarin,  
Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**


#### **MARSTON, JACQUELINE**

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**


#### **MARSTON, JACQUELINE**

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **MARSTON, JACQUELINE**

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**





#### **MATICH, BRANKO**



Provider ID: 482070  
 Provider Gender: Male  
 License Number: C174985  
 NPI: 1023437704  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858) 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 8:30AM-5:30PM  
 TU 8:30AM-8:30PM  
 W-F 8:30AM-5:30PM  
 SA 9AM-4PM

### **FAMILY PRACTICE**

#### **MATICH, BRANKO**





Provider ID: 206046  
 Provider Gender: Male  
 License Number: C174985  
 NPI: 1023437704  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

### **FAMILY PRACTICE**






#### **MATICH, BRANKO**

Provider ID: 206046  
 Provider Gender: Male  
 License Number: C174985  
 NPI: 1023437704  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD

SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

### **FAMILY PRACTICE**

#### **MCLAUGHLIN, ERIK**

Provider ID: 207382  
 Provider Gender: Male  
 License Number: C176574  
 NPI: 1861637217  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 2630 1ST AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 234-2158  
 After Hours Phone: (619) 234-2158  
 Website: [WWW.SDAIHC.ORG](http://WWW.SDAIHC.ORG)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Hours: M-F 8AM-5PM  
Indian Health Services: Y

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### **FAMILY PRACTICE**

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#### **MELGAR, MONICA**

Provider ID: 402851

Provider Gender: Female

License Number: A154399

NPI: 1629432174

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W  
8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

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### **FAMILY PRACTICE**

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#### **MORALES, ALEJANDRA**

Provider ID: 227409

Provider Gender: Female


License Number: A162332


NPI: 1063945657


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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#### **NAVARRO, VANESSA MARIA**


Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Filipino, Spanish,  
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA

MED CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

---

#### **NGUYEN, NGOC**


Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **FAMILY PRACTICE**

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#### **ANIAZI, HARRIS**

*Provider ID: 206360*

*Provider Gender: Male*

*License Number: A146111*

*NPI: 1174905871*

*Provider English Spoken: Y*


*Provider Language(s) Spoken: Farsi*


*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*


 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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### **FAMILY PRACTICE**

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#### **NORRIS, JEFFREY**

*Provider ID: 403583*

*Provider Gender: Male*

*License Number: A136275*

*NPI: 1073870374*

*Provider English Spoken: Y*

*Provider Language(s)*


*Spoken: Spanish*


*Cultural Competency: N*


*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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### **FAMILY PRACTICE**

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#### **NUQUI, JOSIE**

*Provider ID: 432308*

*Provider Gender: Female*

*License Number: A71544*

*NPI: 1184773673*

*Provider English Spoken: Y*


*Provider Language(s) Spoken: Spanish, Tagalog*


*Cultural Competency: N*


*Board Certified Specialty: No*

*OPERATION SAMAHAN*

 9855 ERMA RD STE 105  
SAN DIEGO, CA 92131

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*


 *Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM SA 8:30AM-5PM*

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### **FAMILY PRACTICE**

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#### **ORTIZ, KENNETH**

*Provider ID: 517403*

*Provider Gender: Male*

*License Number: A156607*

*NPI: 1356761571*

*Provider English Spoken: Y*


*Cultural Competency: N*


*Hospital Affiliation:*

*GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 316 25TH ST  
SAN DIEGO, CA 92102

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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### **FAMILY PRACTICE**

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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **PALOMINO, VERONICA**

Provider ID: 206360

Provider Gender: Female

License Number: A121451

NPI: 1255569083

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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### **PEREZ, PERLITA**

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

### **SAN DIEGO**

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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### **POSADA, SEAN**

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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### **PROPST, TOBE**

Provider ID: 403583

Provider Gender: Male

License Number: A82123

NPI: 1194814277

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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### **RAGUVEER, VISHAKA**

Provider ID: 618164

Provider Gender: Female

NPI: 1740609387

Provider English Spoken: Y




Cultural Competency: N

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 9995 CARMEL MOUNTAIN RD STE 10-11B  
 SAN DIEGO, CA 92129  
 Phone: (844) 200-2426  
 Fax: (858) 240-6470  
 After Hours Phone: (844) 200-2426  
 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **RAGUVEER, VISHAKA**

Provider ID: 418535

Provider Gender: Female

License Number: A172736

NPI: 1740609387

 Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN


 9995 CARMEL MOUNTAIN RD STE B10 AND B11  
 SAN DIEGO, CA 92129  
 Phone: (916) 419-7292  
 After Hours Phone: (916) 419-7292  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU  
 8:30AM-5:30PM  
 W 10AM-7PM  
 TH-F 8:30AM-5:30PM

### **FAMILY PRACTICE**



#### **RAMIREZ, CRISTHIAN**

Provider ID: 206360

Provider Gender: Female

License Number: 20A17478

NPI: 1407200942

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619) 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM  
 TU-TH 8AM-6PM  
 F 8AM-5:30PM  
 SA 8AM-5PM

### **FAMILY PRACTICE**

#### **RIDGE, NEAL**

Provider ID: 631494



Provider Gender: Male


License Number: 20A6920

NPI: 1053381004

 Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
 SAN DIEGO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **RITTER, STEVEN**

Provider ID: 451167

Provider Gender: Male


License Number: 20A7435


NPI: 1356556021

 Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 950 S EUCLID AVE  
 SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **RODRIGUEZ, SEAN**

Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **ROSADO, IVAN**

Provider ID: 517403

Provider Gender: Male

License Number: A169434


NPI: 1316479603


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 316 25TH ST  
SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **ROSENBAUM, HERBERT**

Provider ID: 631494

Provider Gender: Male

License Number: A169694

NPI: 1922532712


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **SCHUMAKER, EDWARD**

Provider ID: 185268

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872


Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 284-4731

 After Hours Phone: (619)  
255-9155

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-6PM  
SA 8AM-2PM*

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### **FAMILY PRACTICE**

---

#### **SCOTT, RYLEE**

*Provider ID: 402851*

*Provider Gender: Male*


*License Number: A162946*


*NPI: 1457887911*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *3705 MISSION BLVD  
SAN DIEGO, CA 92109*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)  
515-2300*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

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### **FAMILY PRACTICE**

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#### **SCOTT, LAGINA**

*Provider ID: 206360*

*Provider Gender: Female*


*License Number: A160489*


*NPI: 1558897009*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *1809 NATIONAL AVE  
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)  
515-2300*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

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### **FAMILY PRACTICE**

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#### **SHEIKH, ZARA**


*Provider ID: 233532*

*Provider Gender: Female*

*License Number: A163512*

*NPI: 1952808727*

 *Provider English Spoken: Y*

 *Provider Language(s)*


*Spoken: Urdu*


*Cultural Competency: N*


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 *4305 UNIVERSITY AVE STE  
150*

*SAN DIEGO, CA 92105*

 *Phone: (619) 280-2058*

 *After Hours Phone: (619)  
280-2058*


 *Website: www.sdfamilycare  
.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\22*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-2PM*

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### **FAMILY PRACTICE**

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#### **SHEIKH, ZARA**


*Provider ID: 233597*

*Provider Gender: Female*

*License Number: A163512*

*NPI: 1952808727*

 *Provider English Spoken: Y*


 *Provider Language(s)*


*Spoken: Urdu*


*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 *4290 POLK AVE  
SAN DIEGO, CA 92105*

 *Phone: (619) 563-0250*

 *After Hours Phone: (619)  
563-0250*


 *Website: www.sdfamilycare  
.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-2PM*

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### **FAMILY PRACTICE**

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#### **SHIRAKI, JEAN**

*Provider ID: 417987*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录





Provider Gender: Female  
 License Number: 20A17577  
 NPI: 1144684382  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Japanese  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 4874 POLK AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 515-2426  
 After Hours Phone: (619)  
 515-2426  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**


**SHUMILAK, KAILI**  
 Provider ID: 418142  
 Provider Gender: Female  
 License Number: 20A12796  
 NPI: 1831489855  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 5160 FEDERAL BLVD






SAN DIEGO, CA 92105  
 Phone: (619) 515-2454  
 After Hours Phone: (619)  
 515-2454  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

**SMOOT, CHARLES**  
 Provider ID: 206360  
 Provider Gender: Male  
 License Number: A97036  
 NPI: 1245490358  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 9AM-5PM

### **FAMILY PRACTICE**

**SMOOT, CHARLES**  
 Provider ID: 356145  
 Provider Gender: Male  
 License Number: A97036  
 NPI: 1245490358  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 2391 ISLAND AVE  
 SAN DIEGO, CA 92102  
 Phone: (619) 515-2435  
 After Hours Phone: (619)  
 515-2435  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

**SNYDER, CHRISTOPHER**  
 Provider ID: 517998  
 Provider Gender: Male  
 License Number: 20A7502  
 NPI: 1922041235  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

*Hospital Affiliation: PIH  
Hospital - Downey, JOHN F  
KENNEDY MEMORIAL HOSP,  
CEDARS SINAI MEDICAL  
CENTER, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
EISENHOWER MEDICAL CTR,  
GROSSMONT HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*


 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A


*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N*


 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **SOPHY, ELIZABETH**


*Provider ID: 403583  
Provider Gender: Female  
License Number: A157547  
NPI: 1013441203*


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


*Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*


 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101


 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500

 Website: N/A

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N*


 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5:30PM

### **FAMILY PRACTICE**


#### **SUMMERS-DAY, COURTNEY**


*Provider ID: 214492  
Provider Gender: Female  
License Number: A112781  
NPI: 1124288873*


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

*Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*


 1016 OUTER RD  
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)  
429-3733

 Website: [www.ibclinic.org](http://www.ibclinic.org)

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N*

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **SWARTZ, JOHN**

*Provider ID: 403583  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131*

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

*Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL, LOS ANGELES  
COUNTY HARBOR UCLA  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500

 Website: N/A

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N*

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
Hours: M-F 8AM-5PM

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### **FAMILY PRACTICE**

---

#### **THAI, JUSTIN**

Provider ID: 206360

Provider Gender: Male

License Number: A177462

NPI: 1093276198

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **THAI, JUSTIN**

Provider ID: 417937

Provider Gender: Male

License Number: A177462

NPI: 1093276198


Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish  
Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### **FAMILY PRACTICE**

---

#### **THOMAS, ZACHARY**

Provider ID: 417987

Provider Gender: Male

License Number: A145023

NPI: 1326453119

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)  
515-2426

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

---

#### **TRAN, TONNIA**

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

Provider English Spoken: Y


Provider Language(s)  
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)  
563-0250

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

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#### **TRUONG, NHA**

Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2400

After Hours Phone: (619)  
515-2400

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### **TSUCHIYA, KIMIKO**

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)  
515-2430

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

#### **VALENZUELA, TRICIA**

Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)  
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### **VILLA, MARIA**

Provider ID: 107710

Provider Gender: Female

NPI: 1861541385

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

655 SATURN BLVD STE J

SAN DIEGO, CA 92154

Phone: (619) 575-4442

Fax: (619) 575-1297

After Hours Phone: (619)  
575-4442

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

### FAMILY PRACTICE

#### **WANG, REGINA**

Provider ID: 403583

Provider Gender: Female

License Number: A109828

NPI: 1154554871

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LONG

BEACH MEMORIAL MED CTR,

UCSD MEDICAL CTR, UCSD LA




JOLLA JOHN SALLY


THORNTON

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619)  
233-8500

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM




### **FAMILY PRACTICE**

#### **WHITE, KATHERINE**

Provider ID: 227409  
Provider Gender: Female  
License Number: A120447  
NPI: 1801112925

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [https://www.syhe  
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **WU, JENNIFER**


Provider ID: 403583  
Provider Gender: Female  
License Number: A54702  
NPI: 1215953013

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin, Spanish  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619)  
233-8500

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM


### **FAMILY PRACTICE**

#### **ZAHLER, MARVIN**

Provider ID: 417937  
Provider Gender: Male  
License Number: 20A11612  
NPI: 1134380710

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **ZINK, IRENE**

Provider ID: 227409  
Provider Gender: Female  
License Number: C54198  
NPI: 1215959549

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

#### FQHC

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363

NPI: 1982747671

Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619)  
515-2560

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### FQHC

### DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782

NPI: 1588901045

Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1250 6TH AVE STE 100  
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619)  
515-2430

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

#### FQHC

### FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)  
515-2426

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

#### FQHC

### FAMILY HEALTH CTR OF SD- ELM ST,

Provider ID: 419167

NPI: 1316419070

Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

140 ELM ST  
SAN DIEGO, CA 92101

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619)  
515-2520

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p style="text-align: center;"><b>FQHC</b></p> <p><b>FAMILY HEALTH CTR SAN DIEGO-OAK PARK,</b>            Provider ID: 418142            NPI: 1336525906  <input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  <input type="checkbox"/> 5160 FEDERAL BLVD            SAN DIEGO, CA 92105  <input type="phone"/> Phone: (619) 515-2454            Fax: (619) 794-2696  <input type="clock"/> After Hours Phone: (619) 515-2454  <input type="website"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F            8:30AM-5:30PM</p>	<p><input type="phone"/> Phone: (619) 515-2406  <input type="clock"/> After Hours Phone: (619) 515-2406  <input type="website"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F            8:30AM-5:30PM</p>	<p style="text-align: center;"><b>FQHC</b></p> <p><b>FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,</b>            Provider ID: 417429            NPI: 1952729303  <input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  <input type="checkbox"/> 1550 BROADWAY STE 2            SAN DIEGO, CA 92101  <input type="phone"/> Phone: (619) 515-2525            Fax: (619) 501-5814  <input type="clock"/> After Hours Phone: (619) 515-2525  <input type="website"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F            8:30AM-5:30PM</p>
<p style="text-align: center;"><b>FQHC</b></p> <p><b>FAMILY HEALTH CTR SAN DIEGO-OAK PARK,</b>            Provider ID: 664747            NPI: 1336525906  <input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  <input type="checkbox"/> 2114 NATIONAL AVE            SAN DIEGO, CA 92113</p>	<p style="text-align: center;"><b>FQHC</b></p> <p><b>FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,</b>            Provider ID: 419529            NPI: 1235521782  <input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  <input type="checkbox"/> 2325 COMMERCIAL ST STE 1400            SAN DIEGO, CA 92113  <input type="phone"/> Phone: (619) 515-2422            Fax: (619) 269-0053  <input type="clock"/> After Hours Phone: (619) 515-2422  <input type="website"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F 8AM-5PM</p>	<p style="text-align: center;"><b>FQHC</b></p> <p><b>FAMILY HLTH CTR SAN DIEGO-BEACH AREA,</b>            Provider ID: 402851            NPI: 1386689701  <input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  <input type="checkbox"/> 3705 MISSION BLVD            SAN DIEGO, CA 92109  <input type="phone"/> Phone: (619) 515-2444</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Fax: (858) 488-1394

☎ After Hours Phone: (619) 515-2444

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM

### FQHC

#### FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937

NPI: 1629456900

☑ Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

📍 4094 4TH AVE  
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

Fax: (619) 501-9645

☎ After Hours Phone: (619) 515-2545

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM

F 8AM-5PM

### FQHC

#### KING CHAVEZ HEALTH CENTER,

Provider ID: 451167

NPI: 1538262092

☑ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 950 S EUCLID AVE  
SAN DIEGO, CA 92114

☎ Phone: (619) 662-4100

Fax: (619) 205-1952

☎ After Hours Phone: (619) 662-4100

🌐 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-4PM

### FQHC

#### LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268

NPI: 1336353721

☑ Provider English Spoken: Y  
Cultural Competency: N

LA MAESTRA FAMILY CLINIC

📍 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

☎ Phone: (619) 280-4213

Fax: (619) 795-9849

☎ After Hours Phone: (619) 280-4213

🌐 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

### FQHC

#### LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1609905215

☑ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

8:30AM-5:30PM

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### FQHC

#### LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1780665877

☐ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)  
279-0925

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F  
8:30AM-5:30PM

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### FQHC

#### LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

☐ Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 1809 NATIONAL AVE

SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 234-2447

🕒 After Hours Phone: (619)  
515-2300

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

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### FQHC

#### LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977

NPI: 1447281936

☐ Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 2204 NATIONAL AVE  
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2355

Fax: (619) 232-7011

🕒 After Hours Phone: (619)  
515-2355

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

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### FQHC

#### MID-CITY COMMUNITY CLINIC,

Provider ID: 233532

NPI: 1962483040

☐ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

Fax: (858) 633-4682

🕒 After Hours Phone: (619)  
280-2058

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-2PM

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### FQHC

#### MID-CITY COMMUNITY CLINIC,

Provider ID: 233597

NPI: 1962483040

☐ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 4290 POLK AVE





SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

Fax: (858) 633-4681






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 After Hours Phone: (619) 563-0250  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 8AM-2PM




### FQHC

#### NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492  
 NPI: 1215246996  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 1016 OUTER RD  
 SAN DIEGO, CA 92154  
 Phone: (619) 429-3733  
 Fax: (619) 628-5550  
 After Hours Phone: (619) 429-3733  
 Website: [www.ibclinic.org](http://www.ibclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 8:30AM-5PM TU-TH 8:30AM-8PM F 8:30AM-5PM

### FQHC

#### NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362  
 NPI: 1184169963  
 Provider English Spoken: Y  
 Cultural Competency: N  
 FAMILY HEALTH CENTERS OF SAN DIEGO  
 3544 30TH ST  
 SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 Fax: (619) 501-0627

 After Hours Phone: (619) 515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### FQHC

#### NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831  
 NPI: 1700821303  
 Provider English Spoken: Y  
 Cultural Competency: N  
 FAMILY HEALTH CENTERS OF SAN DIEGO

 3514 30TH ST  
 SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 Fax: (619) 683-7586

 After Hours Phone: (619)

515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-TH 8AM-5PM

### FQHC


#### NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362


NPI: 1700821303

 Provider English Spoken: Y  
 Cultural Competency: N  
 FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST  
 SAN DIEGO, CA 92104

 Phone: (619) 515-2424

Fax: (619) 501-0627

 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### FQHC


#### OPERATION SAMAHAN - MIRA MESA,

Provider ID: 432308


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


NPI: 1861933897


 Provider English Spoken: Y  
Cultural Competency: N  
OPERATION SAMAHAN

 9855 ERMA RD STE 105  
SAN DIEGO, CA 92131

 Phone: (844) 200-2426

 Fax: (858) 536-8034

 After Hours Phone: (844)  
200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


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### FQHC


#### OPERATION SAMAHAN - MIRA MESA,


Provider ID: 417101

NPI: 1871680397


 Provider English Spoken: Y  
Cultural Competency: N  
OPERATION SAMAHAN

 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 Fax: (858) 578-4417

 After Hours Phone: (844)  
200-2426


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1003902917

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-4:30PM

---


### FQHC


#### OPERATION SAMAHAN


#### RANCHO PENASQUITOS,


Provider ID: 418535

NPI: 1699216622


 Provider English Spoken: Y  
Cultural Competency: N  
OPERATION SAMAHAN

 9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 Fax: (858) 695-9074


 After Hours Phone: (844)  
200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM


---

### FQHC


#### SAN DIEGO AMERICAN


#### INDIAN HEALTH CENTER,

Provider ID: 207382

 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE  
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 Fax: (619) 234-0206

 After Hours Phone: (619)  
234-2158

 Website: [WWW.SDAIHC.ORG](http://WWW.SDAIHC.ORG)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
Indian Health Services: Y


---

### FQHC


#### SAN DIEGO FAMILY CARE,


Provider ID: 482070

NPI: 1457724858


 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

American Sign Language (ASL): Provider English Spoken: Y N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM  
TU 8:30AM-8:30PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

---

### FQHC

#### SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403

NPI: 1598308926

Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP

316 25TH ST  
SAN DIEGO, CA 92102

Phone: (619) 238-5551  
Fax: (619) 238-3807

After Hours Phone: (619) 238-5551

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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### FQHC

#### SAN YSIDRO HEALTH CHC - OCEAN VIEW,

Provider ID: 227409

NPI: 1326225632

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

Phone: (619) 662-4100  
Fax: (619) 595-0258

After Hours Phone: (619) 662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

---

### FQHC

#### SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: 517998

NPI: 1205477841

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 662-4100  
Fax: (619) 824-9076

After Hours Phone: (619) 662-4100

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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### FQHC

#### SAN YSIDRO HEALTH

PRECISION PARK,

Provider ID: 631494

NPI: 1124782685

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

Phone: (619) 662-4100  
Fax: (619) 600-4870

After Hours Phone: (619) 662-4100

Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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### FQHC

#### SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 356145






NPI: 1174549232

Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

 2391 ISLAND AVE  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2435  
Fax: (619) 515-2435  
 After Hours Phone: (619)  
515-2435  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER


### **FQHC**







#### **ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,**

Provider ID: 403583  
NPI: 1659415131  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
Fax: (619) 687-1067  
 After Hours Phone: (619)  
233-8500  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5:30PM

### **GASTROENTEROLOGY**

**FRENETTE, CATHERINE**  
Provider ID: 417937  
Provider Gender: Female  
License Number: A80461  
NPI: 1417935081  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, CALIFORNIA  
PACIFIC MED CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **GASTROENTEROLOGY**

**HAI, FAIZI**  
Provider ID: 417937  
Provider Gender: Male  
License Number: A159324

NPI: 1639523228  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **GENERAL PRACTICE**

**BELLO, OSAGIE**  
Provider ID: 417101  
Provider Gender: Male  
License Number: A115182  
NPI: 1164726378  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
GREEN HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
OPERATION SAMAHAN

10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126  
Phone: (844) 200-2426  
After Hours Phone: (844)  
200-2426  
Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4:30PM

### GENERAL PRACTICE

**BORRERO, MARCOS**

Provider ID: 100677  
Provider Gender: Male  
NPI: 1952312621

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

3490 PALM AVE  
SAN DIEGO, CA 92154  
Phone: (619) 423-5616

Fax: (619) 423-5684

After Hours Phone: (619)  
423-5616

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### GENERAL PRACTICE

**DOAN STEPHENS, CRYSTAL**

Provider ID: 233532  
Provider Gender: Female  
License Number: A152267  
NPI: 1730570144

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)  
280-2058

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### GENERAL PRACTICE

**RECALDE, FRANCISCO**

Provider ID: 13850  
Provider Gender: Male  
NPI: 1538309067

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

3811 EL CAJON BLVD  
SAN DIEGO, CA 92105

Phone: (619) 284-5622

Fax: (619) 566-4655

After Hours Phone: (619)  
507-3050

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

### GENERAL PRACTICE

**RECALDE, FRANCISCO**

Provider ID: 13850  
Provider Gender: Male  
NPI: 1538309067

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### MERCY HOSPITAL

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

3811 EL CAJON BLVD  
SAN DIEGO, CA 92105

Phone: (619) 284-5622  
Fax: (619) 566-4655

After Hours Phone: (619)  
507-3050

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

### HEPATOLOGY

#### GISH, ROBERT

Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

Provider English Spoken: Y

Provider Language(s)  
Spoken: Dutch, French,  
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY COMM  
MED CTR

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)  
255-9155

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

2325 COMMERCIAL ST STE  
1400

SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619)  
515-2422

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### ALDOUS, JEANNETTE

Provider ID: 451167

Provider Gender: Female

License Number: A101017

NPI: 1073650339

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Hospital Affiliation: UCSD  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE  
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)  
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### INTERNAL MEDICINE

#### ASKAR, MINA

Provider ID: 417937

Provider Gender: Female

License Number: A187343

NPI: 1457939928

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-9PM  
F 8AM-5PM

### INTERNAL MEDICINE

#### BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17702

NPI: 1841794344

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### BRIONES COLMAN, FELICIA

Provider ID: 417937

Provider Gender: Female

License Number: A80153

NPI: 1962517367

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish



Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

 Phone: (619) 515-2545  
 After Hours Phone: (619) 515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### INTERNAL MEDICINE


#### **CHAN, ANDY**

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352

NPI: 1104480912


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO


 4094 4TH AVE  
SAN DIEGO, CA 92103


 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### INTERNAL MEDICINE


#### **CSAPOCZI, PETER**


Provider ID: 451167

Provider Gender: Male

License Number: A96919

NPI: 1841357118


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hungarian,  
Spanish, Ukrainian


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4PM

### INTERNAL MEDICINE

#### **CURTIS, MEGAN**

Provider ID: 206360

Provider Gender: Female


License Number: A187390


NPI: 1699138115


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113


 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

#### **DAHMS, ERIC**

Provider ID: 417937

Provider Gender: Male

License Number: G80316


NPI: 1306808464

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

☎ After Hours Phone: (619) 515-2545

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

#### DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 4094 4TH AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM

F 8AM-5PM

### INTERNAL MEDICINE

#### DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male

License Number: 20A21421

NPI: 1932785367

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Hindi

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 4094 4TH AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### INTERNAL MEDICINE

#### DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 4094 4TH AVE

SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### INTERNAL MEDICINE

#### FABELLA, GABRIEL

Provider ID: 9774

Provider Gender: Male

NPI: 1124060827

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Japanese, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 10737 CAMINO RUIZ STE 115

SAN DIEGO, CA 92126



☎ Phone: (858) 695-1262

Fax: (858) 695-2132

☎ After Hours Phone: (858)



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


695-1262  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-3PM

### **INTERNAL MEDICINE**

#### **FARASAT, SADAF**


Provider ID: 206360  
Provider Gender: Female  
License Number: A147939  
NPI: 1255696407  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi, Punjabi,  
Urdu  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, NATIVIDAD MEDICAL  
CENTER, PALOMAR MEDICAL  
CENTER  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO






 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **INTERNAL MEDICINE**

#### **GERWER, JOHANNA**








Provider ID: 206360  
Provider Gender: Female  
License Number: A169752  
NPI: 1043742588  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **INTERNAL MEDICINE**


#### **GUTIERREZ, ANGELICA**

Provider ID: 233597  
Provider Gender: Female  
License Number: A175116  
NPI: 1982180329

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 563-0250  
 After Hours Phone: (619)  
563-0250  
 Website: www.sdfamilycare  
.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **INTERNAL MEDICINE**

#### **HAZELBAKER, PAUL**

Provider ID: 417782  
Provider Gender: Male  
License Number: 20A7147  
NPI: 1831106103  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2430  
 After Hours Phone: (619)  
515-2430  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### INTERNAL MEDICINE

---

#### HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male


License Number: A140324


NPI: 1447678834


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)  
515-2545


 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### INTERNAL MEDICINE

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#### JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356


NPI: 1285830505

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645


 After Hours Phone: (619)  
515-2545

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### INTERNAL MEDICINE

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#### JEONG, MATTHEW

Provider ID: 417782

Provider Gender: Male

License Number: A190535


NPI: 1558982512


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1250 6TH AVE STE 100

SAN DIEGO, CA 92101


 Phone: (619) 515-2430


 After Hours Phone: (619)  
515-2430

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### INTERNAL MEDICINE

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#### KHANNA, POORNIMA

Provider ID: 185268

Provider Gender: Female

License Number: A70714


NPI: 1598862583


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)  
280-4213

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

License Number: A71671


NPI: 1760406649


Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### LU, STEPHANIE

Provider ID: 206362

Provider Gender: Female

License Number: 20A20252

NPI: 1518524586


Provider English Spoken: Y

Provider Language(s)


Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### LU, STEPHANIE

Provider ID: 206362

Provider Gender: Female

License Number: 20A20252

NPI: 1518524586


Provider English Spoken: Y

Provider Language(s)


Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### MARCINIAK, ROMAN

Provider ID: 206360

Provider Gender: Male


License Number: 20A17072


NPI: 1326579210

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### NARANJO, RODRIGO

Provider ID: 482070

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




 7011 LINDA VISTA RD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。








## C. 初级保健目录

SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858) 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER



### **INTERNAL MEDICINE**

**NARANJO, RODRIGO**  
Provider ID: 206046  
Provider Gender: Male  
License Number: A119010  
NPI: 1609095264  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**



**NARANJO, RODRIGO**  
Provider ID: 206046  
Provider Gender: Male  
License Number: A119010  
NPI: 1609095264  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**

**NARAYANAN, MEENA**  
Provider ID: 206363  
Provider Gender: Female  
License Number: A113448  
NPI: 1508170697  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Farsi, Spanish  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
Adventist Health and Rideout  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 4725 MARKET ST  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619) 515-2560  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**

**PARIKH, MILIND**  
Provider ID: 206363  
Provider Gender: Male  
License Number: 20A13745  
NPI: 1194161406  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Gujarati, Hindi, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp  
Grossmont Hospital, Adventist  
Health and Rideout  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560  
After Hours Phone: (619)  
515-2560

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### INTERNAL MEDICINE

### RAMERS, CHRISTIAN

Provider ID: 417937  
Provider Gender: Male  
License Number: A119631  
NPI: 1730381385

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### INTERNAL MEDICINE

### ROUEL, WADI

Provider ID: 185268  
Provider Gender: Male  
License Number: C55979  
NPI: 1740254713

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, Spanish,  
Syriac

Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, GROSSMONT  
HOSPITAL

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 255-9155  
After Hours Phone: (619)  
255-9155

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-6PM  
SA 8AM-2PM

#### INTERNAL MEDICINE

### SASSIC, JESSICA

Provider ID: 417937  
Provider Gender: Female  
License Number: A185024  
NPI: 1598342529

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-TH 8AM-9PM  
F 8AM-5PM

#### INTERNAL MEDICINE

### SHAMSINEJAD BABAKI, ARASH

Provider ID: 631494  
Provider Gender: Male  
License Number: A81206  
NPI: 1750498119

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi

Cultural Competency: N  
Hospital Affiliation: ST MARYS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### MEDICAL CENTER SAN FRANCISCO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1666 PRECISION PARK LN  
SAN DIEGO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100

Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

#### INTERNAL MEDICINE

### SHI, RUJING

Provider ID: 417937  
Provider Gender: Female  
License Number: 20A19399  
NPI: 1710446539  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619) 515-2545  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-TH 8AM-9PM  
F 8AM-5PM

#### INTERNAL MEDICINE

### SLAYDEN, TANNER

Provider ID: 675582  
Provider Gender: Male  
NPI: 1154779205  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

#### INTERNAL MEDICINE

### SMILDE, RENEE

Provider ID: 417937  
Provider Gender: Female  
License Number: A70175  
NPI: 1427010594

Provider English Spoken: Y  
Provider Language(s) Spoken: Dutch  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619) 515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Hours: M-TH 8AM-9PM  
F 8AM-5PM

#### INTERNAL MEDICINE

### URIBE-BRUCE, LILIANA

Provider ID: 206360  
Provider Gender: Female  
License Number: C55724  
NPI: 1689010324

Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

#### INTERNAL MEDICINE

### VALDEZ, KRYSTAL

Provider ID: 417101  
Provider Gender: Female  
License Number: A156854  
NPI: 1629480272

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N

Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL  
Board Certified Specialty: No  
OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235  
SAN DIEGO, CA 92126  
Phone: (844) 200-2426  
After Hours Phone: (844)

200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

#### INTERNAL MEDICINE

### VIDAURAZAGA, MONICA

Provider ID: 417937  
Provider Gender: Female  
License Number: A169207  
NPI: 1346628310

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619) 515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

#### INTERNAL MEDICINE

### WASTILA, LISA

Provider ID: 403583  
Provider Gender: Female  
License Number: A60801  
NPI: 1043375231

Provider English Spoken: Y  
Provider Language(s)  
Spoken: German

Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

THORNTON  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
Phone: (619) 233-8500  
After Hours Phone: (619) 233-8500

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
Accessibility: CONTACT PROVIDER

#### INTERNAL MEDICINE

### WATTANAMANO, PORNTHEP

Provider ID: 206046  
Provider Gender: Male  
License Number: C186338  
NPI: 1295738516

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Thai

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)



*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM

### **INTERNAL MEDICINE**

#### **WATTANAMANO, PORNTHEP**

*Provider ID: 206046*  
*Provider Gender: Male*  
*License Number: C186338*  
*NPI: 1295738516*  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Thai



*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

*Medi-Cal Open Panel: Yes*


*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM

### **INTERNAL MEDICINE**

#### **WATTS, ELI**

*Provider ID: 451167*  
*Provider Gender: Male*  
*License Number: A79383*  
*NPI: 1649373739*  
 Provider English Spoken: Y  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
 MEMORIAL HOSPITAL

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 950 S EUCLID AVE  
 SAN DIEGO, CA 92114  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL):*  
 N

 Accessibility: CONTACT PROVIDER


### **INTERVENTIONAL**


### **CARDIOLOGY**

#### **MOUSSAVIAN, MEHRAN**

*Provider ID: 206363*  
*Provider Gender: Male*  
*License Number: 20A7241*  
*NPI: 1689788234*  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi

*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
 CHULA VISTA MED CTR, TRI  
 CITY MEDICAL CTR, SHARP  
 MEMORIAL HOSPITAL,  
 ALVARADO HOSPITAL LLC,  
 GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MEMORIAL HOSPITAL,  
 Adventist Health and Rideout  
*Board Certified Specialty: No*  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 4725 MARKET ST  
 SAN DIEGO, CA 92102  
 Phone: (619) 263-2499  
 After Hours Phone: (619)  
 263-2499

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

**PROVIDER**  
Hours: M-F  
8:30AM-5:30PM

### **INTERVENTIONAL CARDIOLOGY**

#### **SHETABI, KAMBIZ**

Provider ID: 206363  
Provider Gender: Male  
License Number: A126187  
NPI: 1972827806  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp  
Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560  
After Hours Phone: (619)  
515-2560  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### **MULTI SPECIALTY MEDICAL CLINIC**

#### **UCSD MEDICAL GROUP,**

Provider ID: 179639  
NPI: 1508968751  
Provider English Spoken: Y  
Cultural Competency: N  
UCSD MEDICAL GROUP  
4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 25\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### **MULTI SPECIALTY MEDICAL CLINIC**

**UCSD MEDICAL GROUP,**  
Provider ID: 179619  
NPI: 1578672184  
Provider English Spoken: Y  
Cultural Competency: N  
UCSD MEDICAL GROUP  
330 LEWIS ST STE 400  
SAN DIEGO, CA 92103  
Phone: (619) 471-9260  
Fax: (619) 471-9310  
After Hours Phone: (619)  
471-9260  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\25

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### **NEUROLOGY**

#### **CANTU-REYNA, GUILLERMO**

Provider ID: 185268  
Provider Gender: Male  
License Number: A41375  
NPI: 1447389101  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 255-9155  
After Hours Phone: (619)  
255-9155  
Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### **NEUROLOGY**


#### **LUHAR, RIYA**


Provider ID: 417937  
Provider Gender: Female  
License Number: 20A19975

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1235665662

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM

F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **AL-MSHHDANI, AYSER**


Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619) 280-4213


 Website: [www.lamaestra.org](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619) 280-4213

 Website: [www.lamaestra.org](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


Hospital Affiliation:

GROSSMONT HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:30AM-5:30PM

F 8:30AM-5PM

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:30AM-5:30PM

F 8:30AM-5PM



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619)  
515-2444  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**



#### **ALIMONOS, LYSISTRATI**

Provider ID: 206362  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

Provider ID: 416831  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18




American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

Provider ID: 206360  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**


Provider ID: 206363  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031  
 Provider English Spoken: Y



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 *Phone: (619) 515-2560*  
 *After Hours Phone: (619) 515-2560*


 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **BLAKE, GARY**



*Provider ID: 206046*  
*Provider Gender: Male*  
*License Number: G44807*  
*NPI: 1497738439*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*  
 *Website: www.sdfamilycare.org*


*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM*


### **OBSTETRICS / GYNECOLOGY**

#### **BLAKE, GARY**


*Provider ID: 206046*  
*Provider Gender: Male*  
*License Number: G44807*  
*NPI: 1497738439*


 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 *Phone: (858) 279-0925*  
 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM*

### **OBSTETRICS / GYNECOLOGY**


#### **BUECHNER, CHARLENE**

*Provider ID: 206362*  
*Provider Gender: Female*  
*License Number: A68463*  
*NPI: 1376663831*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 3544 30TH ST  
SAN DIEGO, CA 92104  
 *Phone: (619) 515-2424*  
 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 206360

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*

*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**


**BUECHNER, CHARLENE**


*Provider ID: 206363*

*Provider Gender: Female*

*License Number: A68463*

*NPI: 1376663831*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL,*

*SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*

*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2420

 After Hours Phone: (619) 515-2420

 Website: [www.fhcsd.org](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**


**CARTER, KHALIL**


*Provider ID: 206363*

*Provider Gender: Male*

*License Number: A113001*

*NPI: 1225231582*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*


*Board Certified Specialty: No FAMILY HEALTH CENTERS OF*

*SAN DIEGO*

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2420


 After Hours Phone: (619) 515-2420


 Website: [www.fhcsd.org](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**


**CARTER, KHALIL**


*Provider ID: 402851*

*Provider Gender: Male*

*License Number: A113001*

*NPI: 1225231582*


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR*

*Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO*




 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

515-2444  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8:30AM-5PM  
TH 9:30AM-6PM

### **OBSTETRICS / GYNECOLOGY**








#### **CARTER, KHALIL**

Provider ID: 206360  
Provider Gender: Male  
License Number: A113001  
NPI: 1225231582  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
GROSSMONT HOSPITAL, TRI  
CITY MEDICAL CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-7PM  
TU-TH 8AM-6PM  
F 8AM-5:30PM  
SA 8AM-5PM


### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 416831  
Provider Gender: Male  
License Number: A113001  
NPI: 1225231582  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
GROSSMONT HOSPITAL, TRI  
CITY MEDICAL CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 206362  
Provider Gender: Male  
License Number: A113001  
NPI: 1225231582  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
GROSSMONT HOSPITAL, TRI  
CITY MEDICAL CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 206362

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## C. 初级保健目录

Provider Gender: Male  
License Number: A113001  
NPI: 1225231582

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
GROSSMONT HOSPITAL, TRI  
CITY MEDICAL CTR  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**

Provider ID: 416831  
Provider Gender: Female  
License Number: A163464  
NPI: 1326531401  
 Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**

Provider ID: 206360  
Provider Gender: Female  
License Number: A163464  
NPI: 1326531401

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital  
Board Certified Specialty: No

#### **FAMILY HEALTH CENTERS OF SAN DIEGO**

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**

Provider ID: 402851  
Provider Gender: Female  
License Number: A163464  
NPI: 1326531401

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619)  
515-2444  
 Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **CHAKRABARTI, PRIYA**

Provider ID: 206363

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

Provider ID: 206363

Provider Gender: Male


License Number: A108228


NPI: 1629277322

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

Provider ID: 402851

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

Provider ID: 206360

Provider Gender: Male


License Number: A108228


NPI: 1629277322

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

Provider ID: 416831

Provider Gender: Male


License Number: A108228


NPI: 1629277322

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DORUELO, ASHLEY**

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DORUELO, ASHLEY**

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)

515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DORUELO, ASHLEY**

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **OBSTETRICS / GYNECOLOGY**


#### **DORUELO, ASHLEY**

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **FOLCH TORRES-AGUIAR, BEATRIZ**


Provider ID: 402851

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish, Yue  
Chinese


Cultural Competency: N

Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
Sharp Grossmont Hospital,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **FOLCH TORRES-AGUIAR, BEATRIZ**


Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish, Yue  
Chinese


Cultural Competency: N

Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
Sharp Grossmont Hospital,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-7PM  
TU-TH 8AM-6PM  
F 8AM-5:30PM  
SA 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **FOLCH TORRES-AGUIAR, BEATRIZ**

Provider ID: 206362

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Provider Language(s)*  
*Spoken: Spanish, Yue Chinese*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
 GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 Sharp Grossmont Hospital,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA  
*Board Certified Specialty: No*  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3544 30TH ST  
 SAN DIEGO, CA 92104  
 *Phone: (619) 515-2424*  
 *After Hours Phone: (619)*  
 515-2424  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT*  
 PROVIDER  
 *Hours: M-F*  
 8:30AM-5:30PM

*Spoken: Spanish, Yue Chinese*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
 GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 Sharp Grossmont Hospital,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA  
*Board Certified Specialty: No*  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3544 30TH ST  
 SAN DIEGO, CA 92104  
 *Phone: (619) 515-2424*  
 *After Hours Phone: (619)*  
 515-2424  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 *Accessibility: CONTACT*  
 PROVIDER  
 *Hours: M-F*  
 8:30AM-5:30PM

*Hospital Affiliation: SCRIPPS*  
 MERCY HOSPITAL, Sharp  
 Grossmont Hospital  
*Board Certified Specialty: No*  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3514 30TH ST  
 SAN DIEGO, CA 92104  
 *Phone: (619) 515-2424*  
 *After Hours Phone: (619)*  
 515-2424  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\18*  
*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT*  
 PROVIDER  
 *Hours: M-TH 8AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

*Provider ID: 206360*  
*Provider Gender: Female*  
*License Number: C174771*  
*NPI: 1053392035*

*Provider English Spoken: Y*

*Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
 MERCY HOSPITAL, Sharp  
 Grossmont Hospital  
*Board Certified Specialty: No*  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

1809 NATIONAL AVE

### **OBSTETRICS / GYNECOLOGY**

#### **FOLCH TORRES-AGUIAR, BEATRIZ**

*Provider ID: 206362*  
*Provider Gender: Female*  
*License Number: A148014*  
*NPI: 1457794752*

*Provider English Spoken: Y*

*Provider Language(s)*

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

*Provider ID: 416831*  
*Provider Gender: Female*  
*License Number: C174771*  
*NPI: 1053392035*

*Provider English Spoken: Y*

*Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

SAN DIEGO, CA 92113  
☎ Phone: (619) 515-2300  
🕒 After Hours Phone: (619) 515-2300  
🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 402851  
Provider Gender: Female  
License Number: C174771  
NPI: 1053392035  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
☎ Phone: (619) 515-2444  
🕒 After Hours Phone: (619) 515-2444

🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 206363  
Provider Gender: Female  
License Number: C174771  
NPI: 1053392035  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 4725 MARKET ST  
SAN DIEGO, CA 92102  
☎ Phone: (619) 515-2560  
🕒 After Hours Phone: (619) 515-2560

🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**

Provider ID: 206363  
Provider Gender: Female  
License Number: A72005  
NPI: 1649208711

☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

📍 4725 MARKET ST  
SAN DIEGO, CA 92102  
☎ Phone: (619) 515-2560  
🕒 After Hours Phone: (619) 515-2560

🌐 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **LIPSCHITZ, LISA**

Provider ID: 402851  
Provider Gender: Female  
License Number: A72005

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)

515-2444

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W 8:30AM-5PM  
TH 9:30AM-6PM

### **OBSTETRICS / GYNECOLOGY**


#### **LIPSCHITZ, LISA**

Provider ID: 206360

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **LIPSCHITZ, LISA**

Provider ID: 416831

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**

Provider ID: 206362

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF






SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104






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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**


Provider ID: 206362  
Provider Gender: Female  
License Number: A72005  
NPI: 1649208711  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**







#### **LOEFFLER, ALLISON**

Provider ID: 206362  
Provider Gender: Female  
License Number: A116680  
NPI: 1700073962  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LOEFFLER, ALLISON**

Provider ID: 416831  
Provider Gender: Female  
License Number: A116680  
NPI: 1700073962  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
 3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104


 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### OBSTETRICS / GYNECOLOGY

#### LOEFFLER, ALLISON

Provider ID: 206360

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-7PM  
TU-TH 8AM-6PM  
F 8AM-5:30PM  
SA 8AM-5PM

### OBSTETRICS / GYNECOLOGY

#### LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### OBSTETRICS / GYNECOLOGY

#### LOEFFLER, ALLISON

Provider ID: 206363

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL

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## C. 初级保健目录

### CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)  
515-2560

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F

8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### RODRIGUEZ JEREZ, ROBERTO

Provider ID: 402851

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109

Phone: (616) 515-2444

After Hours Phone: (616)  
515-2444

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206360

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8AM-7PM  
TU-TH 8AM-6PM  
F 8AM-5:30PM  
SA 8AM-5PM*

### **OBSTETRICS / GYNECOLOGY**


#### **RODRIGUEZ JEREZ, ROBERTO**

*Provider ID: 206362*

*Provider Gender: Male*

*License Number: A154298*

*NPI: 1710316450*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SHARP*

*CORONADO HOSP AND*


*HEALTHCARE CTR,*


*GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *3544 30TH ST  
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)  
515-2424*


 *Website: www.fhcsd.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F  
8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**


#### **RODRIGUEZ JEREZ, ROBERTO**

*Provider ID: 206362*

*Provider Gender: Male*

*License Number: A154298*

*NPI: 1710316450*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SHARP*

*CORONADO HOSP AND*


*HEALTHCARE CTR,*


*GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF  
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 *After Hours Phone: (619)  
515-2424*

 *Website: www.fhcsd.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F  
8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **RODRIGUEZ JEREZ, ROBERTO**

*Provider ID: 206363*

*Provider Gender: Male*

*License Number: A154298*

*NPI: 1710316450*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SHARP*

*CORONADO HOSP AND*


*HEALTHCARE CTR,*


*GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *4725 MARKET ST  
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2420*

 *After Hours Phone: (619)  
515-2420*


 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F  
8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**

*Provider ID: 206363*

*Provider Gender: Female*


*License Number: A164859*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1952751711

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**


Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

#### **SAN DIEGO**

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **SAPRA, SONIA**

Provider ID: 206360

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**


Provider ID: 402851

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W  
8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


### SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372


NPI: 1245590124


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### OBSTETRICS / GYNECOLOGY

### SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372


NPI: 1245590124


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### OBSTETRICS / GYNECOLOGY

### STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W

8:30AM-5:30PM

TH 9AM-6PM

F 8:30AM-5:30PM

### OBSTETRICS / GYNECOLOGY

### STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Hours: M-TH 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **TRUJILLO, JENNIFER**

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA  
VISTA, SHARP CHULA VISTA  
MED CTR


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)


662-4100

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**


Provider ID: 206362

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,


GROSSMONT HOSPITAL,


DESERT REGIONAL MED CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2400

 After Hours Phone: (619)  
515-2400

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH  
 8:30AM-5:30PM  
 F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

Provider ID: 416831  
 Provider Gender: Female  
 License Number: 20A11535  
 NPI: 1811162456  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SHARP  
 CORONADO HOSP AND  
 HEALTHCARE CTR,  
 GROSSMONT HOSPITAL,  
 DESERT REGIONAL MED CTR  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3514 30TH ST  
 SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
 515-2424  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\18  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

Provider ID: 206360  
 Provider Gender: Female  
 License Number: 20A11535  
 NPI: 1811162456  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SHARP  
 CORONADO HOSP AND  
 HEALTHCARE CTR,  
 GROSSMONT HOSPITAL,  
 DESERT REGIONAL MED CTR  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

Provider ID: 206362  
 Provider Gender: Female  
 License Number: 20A11535  
 NPI: 1811162456  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SHARP  
 CORONADO HOSP AND  
 HEALTHCARE CTR,  
 GROSSMONT HOSPITAL,  
 DESERT REGIONAL MED CTR  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3544 30TH ST  
 SAN DIEGO, CA 92104  
 Phone: (619) 515-2400  
 After Hours Phone: (619)  
 515-2400  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH  
 8:30AM-5:30PM  
 F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Provider ID: 402851

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **WINESBURG, JENNIFER**

Provider ID: 206363

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR,

GROSSMONT HOSPITAL,  
DESERT REGIONAL MED CTR

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2420

 After Hours Phone: (619)  
515-2420

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560  
After Hours Phone: (619)  
515-2560

Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

#### SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619)  
515-2300

Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3514 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**


#### **ZIEG, ALAN**

*Provider ID: 206362*

*Provider Gender: Male*

*License Number: G78814*

*NPI: 1699790634*

 *Provider English Spoken: Y*


*Cultural Competency: N*


*Hospital Affiliation:*

*GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *3544 30TH ST  
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)  
515-2424*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

### **OPHTHALMOLOGY**


#### **NAJAFI, DAVID**


*Provider ID: 206360*

*Provider Gender: Male*

*License Number: A68124*

*NPI: 1396715991*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Farsi, Persian,  
Spanish*


*Cultural Competency: N*


*Hospital Affiliation:*

*GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *1809 NATIONAL AVE  
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)  
515-2300*

 *Website: www.fhcsd.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TU 8:30AM-6PM  
TH 8:30AM-6PM  
F 8:30AM-5PM  
SA 8:30AM-5PM*

### **OPHTHALMOLOGY**

#### **SHAW, BLAKE**

*Provider ID: 206363*

*Provider Gender: Male*

*License Number: G61394*

*NPI: 1649206541*


 *Provider English Spoken: Y*


 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *4725 MARKET ST  
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619)  
515-2560*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

 *Accessibility: CONTACT PROVIDER*

### **OPHTHALMOLOGY**

#### **ZABLIT, KARIM**

*Provider ID: 403583*

*Provider Gender: Male*

*License Number: A42127*

*NPI: 1083700538*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: French*







*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL*



*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619)  
233-8500  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-4:45PM


### OTOLARYNGOLOGY

**DAVIS, MORGAN**  
Provider ID: 206360  
Provider Gender: Female  
License Number: A181809  
NPI: 1891359154  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

### PROVIDER


### OTOLARYNGOLOGY

**YOUSEF, ANDREW**  
Provider ID: 206360  
Provider Gender: Male  
License Number: A186426  
NPI: 1275152662  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


### PEDIATRICS


**ABELL, GEOFFREY**  
Provider ID: 27341  
Provider Gender: Male  
NPI: 1245256130  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PARADISE VALLEY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, SCRIPPS MERCY  
HOSPITAL  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 292 EUCLID AVE STE 220  
SAN DIEGO, CA 92114

 Phone: (619) 262-8624  
Fax: (619) 262-6639

 After Hours Phone: (619)  
262-8624


 Website: N/A  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

**ABRAMSON, RACHEL**  
Provider ID: 185268  
Provider Gender: Female  
License Number: A104918  
NPI: 1588707178  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS GREEN  
HOSPITAL, SHARP CHULA  
VISTA MED CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)  
280-4213

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 8AM-2PM

### PEDIATRICS

#### ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619)  
255-9155

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR HEALTH,  
PALOMAR MEDICAL CENTER  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

16918 DOVE CANYON RD  
STE 200

SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858)  
924-1960

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### ANDREE, GREGOR

Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)  
Spoken: German, Spanish  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)  
280-2058

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### ANDREE, GREGOR

Provider ID: 482070

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

*Spoken: German, Spanish  
Cultural Competency: N*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)  
810-8700


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M 8:30AM-5:30PM*

*TU 8:30AM-9PM*

*W-F 8:30AM-5:30PM*

*SA 9AM-4PM*

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### **PEDIATRICS**


#### **ARCHAMBAULT, CHRISTIAN**

*Provider ID: 5589*

*Provider Gender: Male*

*NPI: 1992776918*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MEMORIAL HOSPITAL, RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO, SCRIPPS MERCY*

*HOSPITAL, PALOMAR*


*HEALTH, SHARP MARY BIRCH*

*HOSP FOR WOMEN AND  
NEWBORNS, CHILDRENS  
HOSPITAL OF ORANGE  
COUNTY, PARADISE VALLEY  
HOSPITAL, PARADISE VALLEY  
HOSPITAL*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 16918 DOVE CANYON RD  
STE 200

SAN DIEGO, CA 92127

 Phone: (858) 924-1960

*Fax: (858) 924-1964*

 *After Hours Phone: (858)  
924-1960*

 Website: N/A


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

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### **PEDIATRICS**


#### **AWDYKOVYCH, MARTA**

*Provider ID: 206360*

*Provider Gender: Female*

*License Number: A44027*

*NPI: 1447265137*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Chinese, French,  
Spanish, Ukrainian*


*Cultural Competency: N*


*Hospital Affiliation: SHARP*


*MEMORIAL HOSPITAL*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 *After Hours Phone: (619)  
515-2300*


 Website: [www.fhcsd.org](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

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### **PEDIATRICS**


#### **AYSON, NICOLE**

*Provider ID: 417429*

*Provider Gender: Female*

*License Number: A128091*

*NPI: 1013278704*

 *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN*


*DIEGO*


*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF*

*SAN DIEGO*

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 *After Hours Phone: (619)  
515-2525*

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **AZIMI, AYSUN**

Provider ID: 317194

Provider Gender: Female

NPI: 1710246160

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP CHULA VISTA

MED CTR, COMMUNITY

REGIONAL MEDICAL

CENTER-FRESNO, CLOVIS

COMMUNITY HOSPITAL,

CLOVIS COMMUNITY

HOSPITAL


Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 292 EUCLID AVE STE 220

SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619)  
262-8624

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **BONSU, BEMA**

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### **CABARLO, JEHRIB**


Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)

515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### **CARSON, STEPHEN**









Provider ID: 6735

Provider Gender: Male

NPI: 1780719872




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: French  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SHARP MEMORIAL  
 HOSPITAL, SCRIPPS MERCY  
 HOSPITAL, RADY CHILDRENS  
 HOSPITAL SAN DIEGO  
 Board Certified Specialty: Yes  
 RADY CHILDRENS HEALTH  
 NETWORK  
 550 WASHINGTON ST STE  
 300  
 SAN DIEGO, CA 92103  
 Phone: (619) 297-5437  
 Fax: (619) 297-4567  
 After Hours Phone: (619)  
 297-5437  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 8AM-8:30PM  
 F 8AM-5PM  
 SA 8AM-2PM






### PEDIATRICS

**CASTELNOVI, CLAUDIA**  
 Provider ID: 185268  
 Provider Gender: Female  
 License Number: A111170  
 NPI: 1417279324






 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: French, Italian,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA  
 Board Certified Specialty: No  
 LA MAESTRA FAMILY CLINIC  
 4060 FAIRMOUNT AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 255-9155  
 After Hours Phone: (619)  
 255-9155  
 Website: www.lamaestra.or  
 g  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS

**CHEN, EILEEN**  
 Provider ID: 606456  
 Provider Gender: Female  
 NPI: 1932660966  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 7910 FROST ST STE 400  
 SAN DIEGO, CA 92123

 Phone: (858) 495-0500  
 Fax: (858) 560-4279  
 After Hours Phone: (858)  
 495-0500  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

**CHEN, JENNIFER**  
 Provider ID: 206363  
 Provider Gender: Female  
 License Number: A141057  
 NPI: 1255785150  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 4725 MARKET ST  
 SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619)  
 515-2560  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### PEDIATRICS

---


#### CONE, STEPHANIE

*Provider ID: 185268*

*Provider Gender: Female*

*License Number: A123929*

*NPI: 1437444858*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL, SCRIPPS*

*MERCY HOSPITAL CHULA*


*VISTA, RADY CHILDRENS*


*HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

 *4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105*

 *Phone: (619) 255-9154*

 *After Hours Phone: (619)  
255-9154*


 *Website: www.lamaestra.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-6PM  
SA 8AM-2PM*

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### PEDIATRICS

---


#### CORDES, WILLIAM

*Provider ID: 206360*

*Provider Gender: Male*

*License Number: 20A15743*

*NPI: 1174942544*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS*


*MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *1809 NATIONAL AVE  
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)  
515-2300*

 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8AM-7PM*

*TU-TH 8AM-6PM*

*F 8AM-5:30PM*

*SA 8AM-5PM*

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### PEDIATRICS

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#### DIXON, SARAH

*Provider ID: 482070*

*Provider Gender: Female*

*License Number: A137415*

*NPI: 1467751131*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 *7011 LINDA VISTA RD  
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)  
810-8700*

 *Website: www.sdfamilycare.org*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:30AM-5:30PM  
TU 8:30AM-8:30PM*

*W-F 8:30AM-5:30PM*

*SA 9AM-4PM*

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### PEDIATRICS

---

#### FISHMAN, ELENA

*Provider ID: 524340*

*Provider Gender: Female*

*NPI: 1740249432*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Russian*

*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*MEMORIAL HOSPITAL,*

*SCRIPPS MEMORIAL*

*HOSPITAL ENCINITAS, RADY*

*CHILDRENS HOSPITAL SAN*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**DIEGO, SCRIPPS MEMORIAL HOSPITAL**  
Board Certified Specialty: No  
**RADY CHILDRENS HEALTH NETWORK**

11943 EL CAMINO REAL STE 210  
SAN DIEGO, CA 92130  
Phone: (858) 793-1011  
After Hours Phone: (858) 793-1011  
Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

**FORTUNE, ERIN**

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619) 515-2424  
Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

### PEDIATRICS

**FORTUNE, ERIN**

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

### PEDIATRICS

**FRIEDMAN, JAIME**

Provider ID: 230500

Provider Gender: Female

NPI: 1144297961

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR HEALTH  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

16918 DOVE CANYON RD  
STE 200  
SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858) 924-1960

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

**GOGGIN, SAMANTHA**

Provider ID: 185268

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。










## C. 初级保健目录

*Provider Gender: Female*  
*License Number: A163693*  
*NPI: 1023506367*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**LA MAESTRA FAMILY CLINIC**  
 4060 FAIRMOUNT AVE  
 SAN DIEGO, CA 92105  
 *Phone: (619) 255-9154*  
 *After Hours Phone: (619) 255-9154*  
 *Website: www.lamaestra.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

### **PEDIATRICS**







#### **GRAY, SARAH**


*Provider ID: 206360*  
*Provider Gender: Female*  
*License Number: A151631*  
*NPI: 1508210311*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
 1809 NATIONAL AVE

SAN DIEGO, CA 92113  
 *Phone: (619) 515-2300*  
 *After Hours Phone: (619) 515-2300*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 8:30AM-7PM  
 TU-TH 8:30AM-6PM  
 F 8:30AM-5:30PM  
 SA 8:30AM-5PM*

### **PEDIATRICS**




#### **GUPTA, VARSHA**

*Provider ID: 206360*  
*Provider Gender: Female*  
*License Number: A164889*  
*NPI: 1891283214*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Hindi, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 *Phone: (619) 515-2300*  
 *After Hours Phone: (619) 515-2300*  
 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

























### **PEDIATRICS**

#### **HENDERSON, TREVOR**

*Provider ID: 58111*  
*Provider Gender: Male*  
*NPI: 1356449425*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, ALVARADO HOSPITAL LLC*  
*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**  
 6699 ALVARADO RD STE 2200  
 SAN DIEGO, CA 92120  
 *Phone: (619) 265-3400*  
*Fax: (619) 265-3407*  
 *After Hours Phone: (619) 265-3400*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p>	<p><i>F 8AM-5PM</i></p> <p><i>SA 8AM-2PM</i></p>	<p><i>Provider ID: 612398</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1750887634</i></p>
<b>PEDIATRICS</b>		
<p><b>HIBBS, NICOLE</b></p> <p><i>Provider ID: 143979</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1164627832</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>RADY CHILDRENS HEALTH NETWORK</i></p> <p> 550 WASHINGTON ST STE 300 SAN DIEGO, CA 92103</p> <p> <i>Phone: (619) 297-5437</i></p> <p><i>Fax: (619) 297-4567</i></p> <p> <i>After Hours Phone: (619) 297-5437</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\19</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-8:30PM</i></p>	<p><b>HOANG, VY</b></p> <p><i>Provider ID: 161902</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1649575135</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>RADY CHILDRENS HEALTH NETWORK</i></p> <p> 6699 ALVARADO RD SAN DIEGO, CA 92120</p> <p> <i>Phone: (619) 265-3400</i></p> <p><i>Fax: (619) 265-3407</i></p> <p> <i>After Hours Phone: (619) 265-3400</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\19</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p><b>HORMOZDYARAN, SANAYA</b></p>	<p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: Yes</i></p> <p><i>RADY CHILDRENS HEALTH NETWORK</i></p> <p> 2790 TRUXTUN RD STE 120A SAN DIEGO, CA 92106</p> <p> <i>Phone: (619) 222-1253</i></p> <p><i>Fax: (619) 222-1276</i></p> <p> <i>After Hours Phone: (619) 222-1253</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\19</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8:30AM-5:30PM</i></p> <p><b>JORDAN, JAMIE</b></p> <p><i>Provider ID: 237831</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1275762833</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO</i></p>
<b>PEDIATRICS</b>		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
**RADY CHILDRENS HEALTH NETWORK**

12036 SCRIPPS  
 HIGHLANDS DR STE 102  
 SAN DIEGO, CA 92131

Phone: (858) 566-4444  
 Fax: (858) 566-3321

After Hours Phone: (858) 566-4444

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### **PEDIATRICS**

**JUAREZ, PATRICIA**

Provider ID: 317641

Provider Gender: Female

NPI: 1205807229

Provider English Spoken: Y

Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
 MARY BIRCH HOSP FOR  
 WOMEN AND NEWBORNS,  
 RADY CHILDRENS HOSPITAL  
 SAN DIEGO, SHARP  
 MEMORIAL HOSPITAL, UCSF  
 BENIOFF CHILDREN'S  
 HOSPITAL OAKLAND  
 Board Certified Specialty: No

**RADY CHILDRENS HEALTH NETWORK**

7910 FROST ST STE 400  
 SAN DIEGO, CA 92123

Phone: (858) 495-0500  
 Fax: (858) 560-4279

After Hours Phone: (858) 495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### **PEDIATRICS**

**KARMAKAR, KANKA**

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)  
 Spoken: Bengali, Hindi,  
 Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No  
**OPERATION SAMAHAN**

10737 CAMINO RUIZ STE  
 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426  
 After Hours Phone: (844) 200-2426

Website: www.operationsa  
 mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU  
 8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

### **PEDIATRICS**

**KESANAPALLI, DEEPTHI**

Provider ID: 235069

Provider Gender: Female

NPI: 1487948584

Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, SHARP MARY BIRCH  
 HOSP FOR WOMEN AND  
 NEWBORNS

Board Certified Specialty: No  
**RADY CHILDRENS HEALTH NETWORK**

7910 FROST ST STE 335  
 SAN DIEGO, CA 92123

Phone: (858) 576-8010  
 Fax: (858) 576-7391

After Hours Phone: (858) 576-8010

Website: N/A



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8:30AM-6PM  
F 8:30AM-0PM*


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### **PEDIATRICS**

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#### **LAWRIE, ALISA**

*Provider ID: 660912*  
*Provider Gender: Female*  
*NPI: 1407847908*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 550 WASHINGTON ST STE 300  
SAN DIEGO, CA 92103  
 *Phone: (619) 297-4567*  
 *After Hours Phone: (619) 297-4567*  
 *Website: N/A*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-8PM  
F 8AM-5PM*

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### **PEDIATRICS**

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#### **LE, NGUYEN**


*Provider ID: 44952*  
*Provider Gender: Male*



*NPI: 1548308109*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish, Vietnamese*

*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 5507 EL CAJON BLVD STE B  
SAN DIEGO, CA 92115  
 *Phone: (619) 582-8814*  
*Fax: (619) 582-8813*  
 *After Hours Phone: (619) 582-8814*

 *Website: N/A*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*

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### **PEDIATRICS**

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#### **LIU, JESICA**


*Provider ID: 206363*

*Provider Gender: Female*  
*License Number: A166312*  
*NPI: 1184157620*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 *Phone: (619) 515-2560*  
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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### **PEDIATRICS**

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#### **LOPER, KAREN**

*Provider ID: 490610*  
*Provider Gender: Female*  
*NPI: 1619908936*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 550 WASHINGTON ST STE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

300  
SAN DIEGO, CA 92103  
Phone: (619) 297-5437  
Fax: (619) 297-4567  
After Hours Phone: (619)  
297-5437  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### PEDIATRICS

#### **LUJAN, ARLEEN**

Provider ID: 206360  
Provider Gender: Female  
License Number: A61687  
NPI: 1760412431  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619)  
515-2300  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### **MADANY, GEORGE**

Provider ID: 318924  
Provider Gender: Male  
NPI: 1811968837  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, French,  
Spanish  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MERCY  
HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7910 FROST ST STE 400  
SAN DIEGO, CA 92123  
Phone: (858) 495-0500  
Fax: (858) 560-4279  
After Hours Phone: (858)  
495-0500  
Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### **MAHENDRAN, SRIVIDYA**

Provider ID: 482070  
Provider Gender: Female  
License Number: A92173  
NPI: 1487843454  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
After Hours Phone: (858)  
810-8700  
Website: www.sdfamilycare  
.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### **MANRIQUEZ-CASTILLO, ERENDIRA**

Provider ID: 185268  
Provider Gender: Female  
License Number: A75533  
NPI: 1356397418  
Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619) 255-9155

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM SA 8AM-2PM

### PEDIATRICS

#### **MARTINEZ-ANDREE, INGRID**

Provider ID: 319049

Provider Gender: Female

NPI: 1205807203

Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 400

SAN DIEGO, CA 92123

Phone: (858) 495-0500

Fax: (858) 560-4279

After Hours Phone: (858) 495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### **MLNARIK, ANASTASIA**

Provider ID: 558645

Provider Gender: Female

NPI: 1972000537

Provider English Spoken: Y Cultural Competency: N

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

11943 EL CAMINO REAL STE 210

SAN DIEGO, CA 92130

Phone: (858) 793-1011

After Hours Phone: (858) 793-1011

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SA 8AM-OPM

### PEDIATRICS

#### **PARK, TARI**

Provider ID: 237711

Provider Gender: Female

NPI: 1285669085

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

12036 SCRIPPS HIGHLANDS DR STE 102 SAN DIEGO, CA 92131

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858) 566-4444

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### **PARKER, SHERINE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 206360  
 Provider Gender: Female  
 License Number: G81658  
 NPI: 1477626513  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: GLENDALE  
 ADVENTIST MED CTR,  
 GLENDALE MEMORIAL HOSP  
 AND HEALTH CTR, TRI CITY  
 MEDICAL CTR, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, VALLEY CHILDRENS  
 HOSPITAL  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M 8:30AM-7PM  
 TU-TH 8:30AM-6PM  
 F 8:30AM-5:30PM  
 SA 8:30AM-5PM

### PEDIATRICS

#### PAVLOVICH, WENDY

Provider ID: 416831

Provider Gender: Female  
 License Number: A126181  
 NPI: 1740467299  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3514 30TH ST  
 SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
 515-2424  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\18  
 American Sign Language (ASL):  
 N

Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS

#### POWELL, STEPHANIE

Provider ID: 319033  
 Provider Gender: Female  
 NPI: 1720059744  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MARY BIRCH HOSP FOR  
 WOMEN AND NEWBORNS,  
 RADY CHILDRENS HOSPITAL  
 SAN DIEGO

Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

7910 FROST ST STE 400  
 SAN DIEGO, CA 92123  
 Phone: (858) 495-0500  
 Fax: (858) 560-4279  
 After Hours Phone: (858)  
 495-0500  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### PEDIATRICS

#### PRESKILL, CATALINA

Provider ID: 403583  
 Provider Gender: Female  
 License Number: G29879  
 NPI: 1598088759  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619)  
 233-8500  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): NPI: 1508209651

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM

---

### **PEDIATRICS**


#### **RODRIGUEZ, JAVIER**

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385


 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)  
255-9155

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---


### **PEDIATRICS**


#### **RODRIGUEZ, ALDO**

Provider ID: 451167

Provider Gender: Male

License Number: A134995

 Provider English Spoken: Y


 Provider Language(s) Spoken: Portuguese,  
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4PM

---

### **PEDIATRICS**

#### **RUBENSTEIN, STUART**

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,


SCRIPPS MEMORIAL


HOSPITAL, SHARP MEMORIAL  
HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 11943 EL CAMINO REAL  
STE 210

SAN DIEGO, CA 92130

 Phone: (858) 793-1011

 After Hours Phone: (858)  
793-1011

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

---

### **PEDIATRICS**

#### **SAMPATH, SRIVIDYA**

Provider ID: 416831

Provider Gender: Female

License Number: A132576

NPI: 1275892754

 Provider English Spoken: Y

 Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


### SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### PEDIATRICS

#### SEBSO, JODI


Provider ID: 206360  
Provider Gender: Female  
License Number: A103099  
NPI: 1538484316  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

### PEDIATRICS

#### SEBSO, JODI

Provider ID: 416831  
Provider Gender: Female  
License Number: A103099  
NPI: 1538484316  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS



#### SHENOY, ASHVIN


Provider ID: 232392


Provider Gender: Male  
NPI: 1619262664

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS, SCRIPPS  
MERCY HOSPITAL  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 292 EUCLID AVE STE 220  
SAN DIEGO, CA 92114  
 Phone: (619) 262-8624  
Fax: (619) 262-6639

 After Hours Phone: (619)  
262-8624

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

#### SHETH, HASMUKH

Provider ID: 451167



Provider Gender: Male

License Number: A45942

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1396812236


 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Gujarati, Hindi,  
 Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY  
 HOSPITAL

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
 SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER


### **PEDIATRICS**

#### **SHIAU, NANCY**

Provider ID: 40852

Provider Gender: Female

NPI: 1750352779


 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL,  
 GROSSMONT HOSPITAL,

RADY CHILDRENS HOSPITAL  
 SAN DIEGO, SHARP MARY  
 BIRCH HOSP FOR WOMEN  
 AND NEWBORNS, ALVARADO  
 HOSP MED CTR


Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

 6699 ALVARADO RD STE  
 2200  
 SAN DIEGO, CA 92120

 Phone: (619) 265-3400

Fax: (619) 265-3407

 After Hours Phone: (619)  
 265-3400


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM

### **PEDIATRICS**


#### **SPITZER, MARSHA**


Provider ID: 206360

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL,  
 GROSSMONT HOSPITAL

Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### **PEDIATRICS**

#### **SPITZER, MARSHA**


Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL,  
 GROSSMONT HOSPITAL

Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO


 3705 MISSION BLVD  
 SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
 515-2444

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### PEDIATRICS


#### **SPITZER, MARSHA**

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)  
515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM


### PEDIATRICS

#### **STUMP, CHARI**

Provider ID: 587747

Provider Gender: Female

NPI: 1265968788

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No


RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 400  
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)  
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **SUBRAMANIAN, RAMA**

Provider ID: 662343

Provider Gender: Female

NPI: 1932593506


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

 11943 EL CAMINO REAL  
STE 210

SAN DIEGO, CA 92130

 Phone: (858) 793-1011

 After Hours Phone: (858)  
793-1011


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### PEDIATRICS


#### **SULEIMAN QAFITI, KHAWLA**

Provider ID: 416831

Provider Gender: Female

License Number: A51318

NPI: 1659303121

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO


 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\18

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-5PM

### PEDIATRICS

#### TAMAYO, MAITHE


Provider ID: 356145  
 Provider Gender: Female  
 License Number: A80504  
 NPI: 1487748430


Provider English Spoken: Y

Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 2391 ISLAND AVE  
 SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)  
 515-2435

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS

#### TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430


Provider English Spoken: Y


Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA

Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS

#### WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

Provider English Spoken: Y


Provider Language(s)  
 Spoken: Russian


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS, SCRIPPS  
 MEMORIAL HOSPITAL

Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

 11943 EL CAMINO REAL  
 STE 210  
 SAN DIEGO, CA 92130

 Phone: (858) 793-1011

 After Hours Phone: (858)  
 793-1011


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM  
 SA 8AM-0PM

### PEDIATRICS

#### WATERS, ELIZABETH

Provider ID: 153090

Provider Gender: Female

NPI: 1730477621

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PARADISE  
VALLEY HOSPITAL, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SCRIPPS MERCY HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

292 EUCLID AVE STE 220  
SAN DIEGO, CA 92114

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)  
262-8624

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### WEATHERLY, JACOB

Provider ID: 637376

Provider Gender: Male

NPI: 1538520457

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: LUCILE  
SALTER PACKARD

CHILDRENS HOSP, Stanford

Health Care

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

6699 ALVARADO RD STE  
2200

SAN DIEGO, CA 92120

Phone: (619) 265-3400

Fax: (619) 265-3407

After Hours Phone: (619)  
265-3400

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8:30AM-0PM

### PEDIATRICS

#### WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE

150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)  
280-2058

Website: www.sdfamilycare  
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### WONG, YOLANDA

Provider ID: 482070

Provider Gender: Female

License Number: A94449

NPI: 1851599872

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)  
810-8700

Website: www.sdfamilycare  
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): \_\_\_\_\_

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

### **PEDIATRICS**


**ZAHEER, AARON**


Provider ID: 233532

Provider Gender: Male

License Number: A61238


NPI: 1902882301


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Persian, Spanish  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)  
280-2058

 Website: www.sdfamilycare  
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**


**ZAHEER, AARON**


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Persian, Spanish  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)  
810-8700

 Website: www.sdfamilycare  
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**


**ZAND, FARIBA**


Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi, Persian,  
Spanish


Cultural Competency: N


Hospital Affiliation: MERCY  
GENERAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MERCY


HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
UCSD MEDICAL CTR

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

**ALVARADO, EDMUND**

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

2325 COMMERCIAL ST STE  
1400

SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619)  
515-2422

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PHYSICIANS ASSISTANT

#### ARMENTA, JORGE

Provider ID: 185268

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)  
255-9155

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 8AM-2PM

### PHYSICIANS ASSISTANT

#### BATISTA, OSVALDO

Provider ID: 206360

Provider Gender: Male

License Number: PA17864

NPI: 1245349224

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

#### CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

#### CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### PHYSICIANS ASSISTANT

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#### CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female


License Number: PA23258


NPI: 1790111607

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### PHYSICIANS ASSISTANT

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#### CONTRERAS, LORETTA

Provider ID: 403583

Provider Gender: Female

License Number: PA54617


NPI: 1679096341


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
TU-W 8:30AM-5PM  
TH 8:30AM-9PM  
F 8:30AM-5PM

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### PHYSICIANS ASSISTANT

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#### DRAME, SALWA

Provider ID: 417987

Provider Gender: Female

License Number: PA59481

NPI: 1093136426


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)  
515-2426

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### PHYSICIANS ASSISTANT

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#### GARCIA, DEANA

Provider ID: 416831

Provider Gender: Female


License Number: PA21042


NPI: 1447567995

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### PHYSICIANS ASSISTANT

---

#### HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female


License Number: PA58505

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 1104203454

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105


 Phone: (619) 515-2454

 After Hours Phone: (619)  
515-2454

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **HOXMEIER, KRISTA**

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **LANDIS, SARAH**

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101

 Phone: (619) 515-2430


 After Hours Phone: (619)  
515-2430

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **LAPINA, LORI**

Provider ID: 417937

Provider Gender: Female

License Number: PA23231


NPI: 1245670413


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **LLOYD, MATTHEW**

Provider ID: 417429

Provider Gender: Male

License Number: PA62752

NPI: 1487307369

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1550 BROADWAY STE 2

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SAN DIEGO, CA 92101  
Phone: (619) 515-2525  
After Hours Phone: (619) 515-2525  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:30AM-5:30PM

### PHYSICIANS ASSISTANT

**LOHNES, ELLIE**  
Provider ID: 417429  
Provider Gender: Female  
License Number: PA63071  
NPI: 1902580426  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
Phone: (619) 515-2525  
After Hours Phone: (619) 515-2525  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F

8:30AM-5:30PM

### PHYSICIANS ASSISTANT

**LOPEZ, MARIO**  
Provider ID: 417937  
Provider Gender: Male  
License Number: PA21385  
NPI: 1932335080  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619) 515-2545  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

**LOPEZ, MARIO**  
Provider ID: 417987  
Provider Gender: Male  
License Number: PA21385  
NPI: 1932335080  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO





















4874 POLK AVE  
SAN DIEGO, CA 92105  
Phone: (619) 515-2426  
After Hours Phone: (619) 515-2426  
Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

**MARTINEZ-MURGUIA, IRENE**  
Provider ID: 185268  
Provider Gender: Female  
License Number: PA20296  
NPI: 1447492889  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 255-9155  
After Hours Phone: (619) 255-9155  
Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p><b>PHYSICIANS ASSISTANT</b></p> <p><b>MERCER, KELLY</b>            Provider ID: 185268            Provider Gender: Female            License Number: PA21625            NPI: 1154609790</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Arabic            Cultural Competency: N            Board Certified Specialty: No  <b>LA MAESTRA FAMILY CLINIC</b>   4060 FAIRMOUNT AVE            SAN DIEGO, CA 92105   Phone: (619) 255-9155   After Hours Phone: (619) 255-9155   Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-6PM            SA 8AM-2PM</p>	<p>Board Certified Specialty: No  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>   4725 MARKET ST            SAN DIEGO, CA 92102   Phone: (619) 515-2560   After Hours Phone: (619) 515-2560   Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p> Accessibility: CONTACT PROVIDER</p>
<p><b>PHYSICIANS ASSISTANT</b></p> <p><b>MILLER, LAUREL</b>            Provider ID: 206363            Provider Gender: Female            License Number: PA20378            NPI: 1598992133</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N</p>	<p><b>PHYSICIANS ASSISTANT</b></p> <p><b>NUNO, JOSE</b>            Provider ID: 206360            Provider Gender: Male            License Number: PA15227            NPI: 1275543068</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>   1809 NATIONAL AVE            SAN DIEGO, CA 92113   Phone: (619) 515-2300   After Hours Phone: (619) 515-2300   Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p>	<p><b>PHYSICIANS ASSISTANT</b></p> <p><b>PENA, NICHOLAS</b>            Provider ID: 206360            Provider Gender: Male            License Number: PA56636            NPI: 1083176077</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>   1809 NATIONAL AVE            SAN DIEGO, CA 92113   Phone: (619) 515-2300   After Hours Phone: (619) 515-2300   Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p> <p><b>PHYSICIANS ASSISTANT</b></p> <p><b>PHUNG, AIVI</b>            Provider ID: 206046            Provider Gender: Female            License Number: PA53902            NPI: 1639528110</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Vietnamese            Cultural Competency: N</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
After Hours Phone: (858)  
279-0925  
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM  
TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM

### PHYSICIANS ASSISTANT

#### PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
After Hours Phone: (858)  
279-0925

Website: www.sdfamilycare

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM  
TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM

### PHYSICIANS ASSISTANT

#### POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560

After Hours Phone: (619)  
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141

NPI: 1407855828

Provider English Spoken: Y  
Cultural Competency: N





Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。









## C. 初级保健目录


 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: <https://www.syhealth.org/locations>  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **RASMUSSEN, DALE**


Provider ID: 417429  
Provider Gender: Male  
License Number: PA54022  
NPI: 1962880864  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO






 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2525  
 After Hours Phone: (619) 515-2525  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **PHYSICIANS ASSISTANT**


#### **SHARPE, NORMA**





Provider ID: 517403  
Provider Gender: Female  
License Number: PA20490  
NPI: 1619100237  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 316 25TH ST  
SAN DIEGO, CA 92102  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **TOMASZEWSKI, DEBRA**

Provider ID: 206363  
Provider Gender: Female  
License Number: PA58081  
NPI: 1215264452  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619) 515-2560  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **TOMASZEWSKI, DEBRA**

Provider ID: 206363  
Provider Gender: Female  
License Number: MT2061555  
NPI: 1215264452  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
 4725 MARKET ST  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619) 515-2560  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

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## C. 初级保健目录

### **TURNER, SHEREENA**

Provider ID: 206360

Provider Gender: Female

License Number: PA20396

NPI: 1992934988

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

### **UDOH, EKAETE**

Provider ID: 418535

Provider Gender: Male

License Number: PA19664

NPI: 1841472776

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN  
RD STE B10 AND B11

SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

### **PHYSICIANS ASSISTANT**

### **YOUNG-PEN, TONI**

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619)  
563-0250

Website: [www.sdfamilycare  
.org](http://www.sdfamilycare<br/>.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

### **YOUNG-PEN, TONI**

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

### **YOUNG-PEN, TONI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish,  
Vietnamese


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### PODIATRIST

#### JUAREZ, LETICIA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

#### SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### PODIATRIST

#### LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: ANAHEIM


REGIONAL MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### PODIATRIST

#### LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: ANAHEIM


REGIONAL MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### PODIATRIST

#### MANCHEL, BRUCE

Provider ID: 631494

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PODIATRIST**

**SCHNEIDER, SARAH**

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PODIATRIST**

**SCHNEIDER, SARAH**

Provider ID: 402851

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3705 MISSION BLVD  
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)  
515-2444

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PODIATRIST**

**SCHNEIDER, SARAH**

Provider ID: 417429

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)  
515-2525

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### **PREVENTATIVE MEDICINE**

#### **GENERAL**

**HILL, LINDA**

Provider ID: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)  
810-8700

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

### PREVENTATIVE MEDICINE GENERAL

#### **HILL, LINDA**

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

### PREVENTATIVE MEDICINE GENERAL

#### **HILL, LINDA**

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

### PREVENTATIVE MEDICINE GENERAL

#### **RISSER, JOSEPH**

Provider ID: 206046

Provider Gender: Male

License Number: G70886

NPI: 1952386765

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

### PREVENTATIVE MEDICINE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### GENERAL

#### **RISSER, JOSEPH**

Provider ID: 206046

Provider Gender: Male

License Number: G70886

NPI: 1952386765

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

### PREVENTATIVE MEDICINE

#### GENERAL

#### **RISSER, JOSEPH**

Provider ID: 482070

Provider Gender: Male

License Number: G70886

NPI: 1952386765

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)  
810-8700

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925


Fax: (858) 279-0377

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### REGISTERED PHYSICAL THERAPIST







**BLOCKER, NIRIT**  
 Provider ID: 206360  
 Provider Gender: Female  
 License Number: PT30272  
 NPI: 1457689309  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hebrew  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 9AM-5PM

### REGISTERED PHYSICAL





**THERAPIST**  
**CHAVARRIA, JESSICA**  
 Provider ID: 417937  
 Provider Gender: Female  
 License Number: PT292351  
 NPI: 1407391808  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
 515-2545  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 8AM-9PM  
 F 8AM-5PM

### REGISTERED PHYSICAL THERAPIST

**CONCORS, ANDREW**  
 Provider ID: 417937  
 Provider Gender: Male  
 License Number: PT12930  
 NPI: 1578706743  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF

SAN DIEGO  
 4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
 515-2545  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 8AM-9PM  
 F 8AM-5PM

### REGISTERED PHYSICAL THERAPIST

**CUMMINGS, GEORGE**  
 Provider ID: 417937  
 Provider Gender: Male  
 License Number: PT295173  
 NPI: 1497236384  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
 515-2545  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): License Number: PT40975  
N

 Accessibility: CONTACT PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---


#### **DAHMS, MADELYNN**


Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Sign Language


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **FIELDING, JOSEPH**

Provider ID: 417937


Provider Gender: Male


NPI: 1235577560


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **HAPKE, ELENA**

Provider ID: 417937

Provider Gender: Female


License Number: PT292613


NPI: 1003354895


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **HERMES, MARY**

Provider ID: 206360

Provider Gender: Female

License Number: PT24707

NPI: 1518028547


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### **REGISTERED PHYSICAL THERAPIST**

---

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## C. 初级保健目录

### IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female

License Number: PT33914

NPI: 1003088063

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### REGISTERED PHYSICAL THERAPIST

### MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

#### REGISTERED PHYSICAL THERAPIST

### MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH 8AM-9PM  
F 8AM-5PM

#### REGISTERED PHYSICAL THERAPIST

### SCHMIDT, BRYAN

Provider ID: 417937

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### REGISTERED PHYSICAL THERAPIST

### VAN DYKE, JASON

Provider ID: 417937


Provider Gender: Male

License Number: PT25155

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## C. 初级保健目录

NPI: 1487658720

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545


 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### RHEUMATOLOGY


**OGANDO, SHEENA**

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: JOHN


MUIR MEDICAL CENTER


WALNUT CREEK CAMPUS

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### RHEUMATOLOGY

**REDDY, DANA**

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### RHEUMATOLOGY

**REDDY, DANA**

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE




SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5:30PM

### **SPEECH PATHOLOGIST**


#### **MILLER, WILLIAM**






Provider ID: 206360  
Provider Gender: Male  
License Number: SP35150  
NPI: 1972002210  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **SPEECH PATHOLOGIST**



#### **WILLIAMS, JESSICA**





Provider ID: 206360  
Provider Gender: Female  
License Number: SP27677  
NPI: 1932680006  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **SAN MARCOS**

### **CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**  
Provider ID: 206426  
Provider Gender: Female  
License Number: NP95001653  
NPI: 1427325166  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP





















 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**  
Provider ID: 206426  
Provider Gender: Female  
License Number: NP95001653  
NPI: 1427325166  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<hr/> <b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b> <hr/>	<i>Cultural Competency: N</i>	<i>Medi-Cal Open Panel: Yes</i>
<b>BINETTE, DONYA</b>	<i>Board Certified Specialty: No</i>	<i>Min/Max Age: 0\None</i>
<i>Provider ID: 206426</i>	<i>IHP OF SOUTHERN CAL-PHP</i>	<i>American Sign Language (ASL):</i>
<i>Provider Gender: Female</i>	 1595 GRAND AVE STE 106	<i>N</i>
<i>License Number: NP95001653</i>	SAN MARCOS, CA 92078	 <i>Accessibility: CONTACT</i>
<i>NPI: 1427325166</i>	 <i>Phone: (760) 736-6767</i>	<i>PROVIDER</i>
<input type="checkbox"/> <i>Provider English Spoken: Y</i>	<i>Fax: (760) 736-6744</i>	<hr/>
<input type="checkbox"/> <i>Provider Language(s)</i>	 <i>After Hours Phone: (760)</i>	<b><u>CERTIFIED NURSE</u></b>
<i>Spoken: Spanish</i>	736-6767	<b><u>PRACTITIONER</u></b> <hr/>
<i>Cultural Competency: N</i>	 <i>Website: www.ihpsocal.org</i>	<b>FODDA, RAMI</b>
<i>Board Certified Specialty: No</i>	<i>Medi-Cal Open Panel: Yes</i>	<i>Provider ID: 614511</i>
<i>IHP OF SOUTHERN CAL-PHP</i>	<i>Min/Max Age: 0\None</i>	<i>Provider Gender: Male</i>
 150 VALPRED A RD	<i>American Sign Language (ASL):</i>	<i>License Number: NP18788</i>
SAN MARCOS, CA 92069	<i>N</i>	<i>NPI: 1164660452</i>
 <i>Phone: (760) 736-6767</i>	 <i>Accessibility: CONTACT</i>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>
 <i>After Hours Phone: (760)</i>	<i>PROVIDER</i>	<input type="checkbox"/> <i>Provider Language(s)</i>
736-6767	<hr/>	<i>Spoken: Arabic</i>
 <i>Website: www.ihpsocal.org</i>	<b><u>CERTIFIED NURSE</u></b>	<i>Cultural Competency: N</i>
<i>Medi-Cal Open Panel: Yes</i>	<b><u>PRACTITIONER</u></b> <hr/>	<i>Board Certified Specialty: No</i>
<i>Min/Max Age: 0\None</i>	<b>FODDA, RAMI</b>	<i>IHP OF SOUTHERN CAL-PHP</i>
<i>American Sign Language (ASL):</i>	<i>Provider ID: 614511</i>	 1595 GRAND AVE STE 106
<i>N</i>	<i>Provider Gender: Male</i>	SAN MARCOS, CA 92078
 <i>Accessibility: CONTACT</i>	<i>License Number: NP18788</i>	 <i>Phone: (760) 736-6767</i>
<i>PROVIDER</i>	<i>NPI: 1164660452</i>	<i>Fax: (760) 736-6744</i>
<hr/>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>	 <i>After Hours Phone: (760)</i>
<b><u>CERTIFIED NURSE</u></b>	<input type="checkbox"/> <i>Provider Language(s)</i>	736-6767
<b><u>PRACTITIONER</u></b> <hr/>	<i>Spoken: Arabic</i>	 <i>Website: www.ihpsocal.org</i>
<b>FODDA, RAMI</b>	<i>Cultural Competency: N</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>Provider ID: 614511</i>	<i>Board Certified Specialty: No</i>	<i>Min/Max Age: 0\None</i>
<i>Provider Gender: Male</i>	<i>IHP OF SOUTHERN CAL-PHP</i>	<i>American Sign Language (ASL):</i>
<i>License Number: NP18788</i>	 1595 GRAND AVE STE 106	<i>N</i>
<i>NPI: 1164660452</i>	SAN MARCOS, CA 92078	 <i>Accessibility: CONTACT</i>
<input type="checkbox"/> <i>Provider English Spoken: Y</i>	 <i>Phone: (760) 736-6767</i>	<i>PROVIDER</i>
<input type="checkbox"/> <i>Provider Language(s)</i>	<i>Fax: (760) 736-6744</i>	<hr/>
<i>Spoken: Arabic</i>	 <i>After Hours Phone: (760)</i>	<b><u>CERTIFIED NURSE</u></b>
	736-6767	<b><u>PRACTITIONER</u></b> <hr/>
	 <i>Website: www.ihpsocal.org</i>	<b>FREEMAN, WANDA</b>


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录

Provider ID: 206426  
 Provider Gender: Female  
 License Number: NP95003903  
 NPI: 1659504264  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP


 150 VALPRED A RD  
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
 736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**


---


#### **FREEMAN, WANDA**


Provider ID: 206426  
 Provider Gender: Female  
 License Number: NP95003903  
 NPI: 1659504264

Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
 736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**


---


#### **FREEMAN, WANDA**


Provider ID: 206426  
 Provider Gender: Female  
 License Number: NP95003903  
 NPI: 1659504264

Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
 736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **HENLEY, MEARA**


Provider ID: 206426  
 Provider Gender: Female


License Number: NP95002545  
 NPI: 1538319645


Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
 736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **HENLEY, MEARA**

Provider ID: 206426  
 Provider Gender: Female  
 License Number: NP95002545  
 NPI: 1538319645

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

☎ After Hours Phone: (760)  
736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **HENLEY, MEARA**

Provider ID: 206426  
Provider Gender: Female  
License Number: NP95002545  
NPI: 1538319645

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD  
SAN MARCOS, CA 92069  
☎ Phone: (760) 736-6767  
☎ After Hours Phone: (760)  
736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE**

### **PRACTITIONER**

#### **KOUSARI, JHALEH**

Provider ID: 206426  
Provider Gender: Female  
License Number: NP20893  
NPI: 1811262405

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD  
SAN MARCOS, CA 92069  
☎ Phone: (760) 736-6767  
☎ After Hours Phone: (760)  
736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **KOUSARI, JHALEH**

Provider ID: 206426  
Provider Gender: Female  
License Number: NP20893  
NPI: 1811262405

☐ Provider English Spoken: Y  
☐ Provider Language(s)

Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD  
SAN MARCOS, CA 92069  
☎ Phone: (760) 736-6767  
☎ After Hours Phone: (760)  
736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **KOUSARI, JHALEH**

Provider ID: 206426  
Provider Gender: Female  
License Number: NP20893  
NPI: 1811262405

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SAN MARCOS, CA 92069  
☎ Phone: (760) 736-6767  
📞 After Hours Phone: (760) 736-6767  
🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER

**MACIAS, ALISSA**  
Provider ID: 206426  
Provider Gender: Female  
License Number: NP21368  
NPI: 1952658445  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 150 VALPRED A RD  
SAN MARCOS, CA 92069  
☎ Phone: (760) 736-6767  
📞 After Hours Phone: (760) 736-6767  
🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER

### CERTIFIED NURSE

**PRACTITIONER**  
**MACIAS, ALISSA**  
Provider ID: 206426  
Provider Gender: Female  
License Number: NP21368  
NPI: 1952658445  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
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### CERTIFIED NURSE PRACTITIONER

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Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER

### CERTIFIED REGISTERED NURSE MIDWIFE

**BELANGER, TANYA**  
Provider ID: 206426  
Provider Gender: Female  
License Number: NM235844  
NPI: 1407287469  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PALOMAR MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 150 VALPRED A RD  
SAN MARCOS, CA 92069  
☎ Phone: (760) 736-6767  
📞 After Hours Phone: (760) 736-6767  
🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<b>CERTIFIED REGISTERED NURSE MIDWIFE</b>	
<p><b>BELANGER, TANYA</b>                      Provider ID: 206426                      Provider Gender: Female                      License Number: NM235844                      NPI: 1407287469                      Provider English Spoken: Y                      Cultural Competency: N                      Hospital Affiliation: PALOMAR MEDICAL CENTER                      Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP                      150 VALPRED A RD                      SAN MARCOS, CA 92069                      Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER                      Hours: M-F 8AM-5PM SA 8AM-5PM</p>	<p>Cultural Competency: N                      Hospital Affiliation: PALOMAR MEDICAL CENTER                      Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP                      150 VALPRED A RD                      SAN MARCOS, CA 92069                      Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER                      Hours: M-F 8AM-5PM SA 8AM-5PM</p>
<b>CERTIFIED REGISTERED NURSE MIDWIFE</b>	
<p><b>BELANGER, TANYA</b>                      Provider ID: 206426                      Provider Gender: Female                      License Number: NM235844                      NPI: 1407287469                      Provider English Spoken: Y</p>	<p>Cultural Competency: N                      Hospital Affiliation: PALOMAR MEDICAL CENTER                      Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP                      150 VALPRED A RD                      SAN MARCOS, CA 92069                      Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER                      Hours: M-F 8AM-5PM SA 8AM-5PM</p>
<b>CERTIFIED REGISTERED NURSE MIDWIFE</b>	
<p><b>KELLY, KATHERINE</b>                      Provider ID: 206426                      Provider Gender: Female                      License Number: NM235997                      NPI: 1801134275                      Provider English Spoken: Y                      Provider Language(s) Spoken: Spanish                      Cultural Competency: N                      Hospital Affiliation: PALOMAR MEDICAL CENTER                      Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP                      150 VALPRED A RD                      SAN MARCOS, CA 92069                      Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER</p>	<p>Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER</p>
<b>CERTIFIED REGISTERED NURSE MIDWIFE</b>	
<p><b>KELLY, KATHERINE</b>                      Provider ID: 206426                      Provider Gender: Female                      License Number: NM235997                      NPI: 1801134275                      Provider English Spoken: Y                      Provider Language(s) Spoken: Spanish                      Cultural Competency: N                      Hospital Affiliation: PALOMAR MEDICAL CENTER                      Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP                      150 VALPRED A RD                      SAN MARCOS, CA 92069                      Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER</p>	<p>Phone: (760) 736-6767                      After Hours Phone: (760) 736-6767                      Website: www.ihpsocal.org                      Medi-Cal Open Panel: Yes                      Min/Max Age: 0\None                      American Sign Language (ASL): N                      Accessibility: CONTACT PROVIDER</p>

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## C. 初级保健目录

PROVIDER		
<b>CERTIFIED REGISTERED NURSE MIDWIFE</b>		
<b>KELLY, KATHERINE</b>	<p>Provider ID: 206426</p> <p>Provider Gender: Female</p> <p>License Number: NM235997</p> <p>NPI: 1801134275</p> <p>Provider English Spoken: Y</p> <p>Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: PALOMAR MEDICAL CENTER</p> <p>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p> <p>150 VALPREDA RD SAN MARCOS, CA 92069</p> <p>Phone: (760) 736-6767</p> <p>After Hours Phone: (760) 736-6767</p> <p>Website: www.ihpsocal.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8AM-6PM SA 8AM-5PM</p>	<p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8AM-6PM SA 8AM-5PM</p>
<b>CHIROPRACTOR</b>		
<b>LOVERN, JENNIFER</b>	<p>Provider ID: 206426</p> <p>Provider Gender: Female</p> <p>License Number: DC29074</p> <p>NPI: 1235469396</p> <p>Provider English Spoken: Y</p> <p>Provider Language(s) Spoken: Italian, Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p> <p>150 VALPREDA RD SAN MARCOS, CA 92069</p> <p>Phone: (760) 736-6767</p> <p>After Hours Phone: (760) 736-6767</p> <p>Website: www.ihpsocal.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8AM-6PM SA 8AM-5PM</p>	<p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8AM-6PM SA 8AM-5PM</p>
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<b>CHIROPRACTOR</b>		
<b>LOVERN, JENNIFER</b>	<p>Provider ID: 206426</p> <p>Provider Gender: Female</p> <p>License Number: DC29074</p> <p>NPI: 1235469396</p> <p>Provider English Spoken: Y</p> <p>Provider Language(s) Spoken: Italian, Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p> <p>150 VALPREDA RD SAN MARCOS, CA 92069</p> <p>Phone: (760) 736-6767</p> <p>After Hours Phone: (760) 736-6767</p> <p>Website: www.ihpsocal.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8AM-6PM SA 8AM-5PM</p>	<p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8AM-6PM SA 8AM-5PM</p>
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<b>FAMILY PRACTICE</b>		
<b>MATIAS, JULIE</b>		

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## C. 初级保健目录





Provider ID: 206426  
Provider Gender: Female  
License Number: 20A15159  
NPI: 1083094510  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**






**MATIAS, JULIE**  
Provider ID: 206426  
Provider Gender: Female  
License Number: 20A15159  
NPI: 1083094510  
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 Provider Language(s)  
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SAN MARCOS, CA 92069

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Min/Max Age: 0\None  
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N  
 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**







**MATIAS, JULIE**  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**NATH, DEVARSHI**

Provider ID: 206426  
Provider Gender: Male  
License Number: C54157  
NPI: 1275630618  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Bengali  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-5PM


### **FAMILY PRACTICE**

**NATH, DEVARSHI**  
Provider ID: 614511  
Provider Gender: Male  
License Number: C54157  
NPI: 1275630618  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Bengali  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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## C. 初级保健目录

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**


#### **NATH, DEVARSHI**

Provider ID: 206426

Provider Gender: Male

License Number: C54157

NPI: 1275630618


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069


 Phone: (760) 736-6767


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PROVIDER

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SA 8AM-5PM

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Provider Gender: Male

License Number: C54157

NPI: 1275630618


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 Provider Language(s)  
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No  
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Min/Max Age: 0\None

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PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **FAMILY PRACTICE**

#### **NATH, DEVARSHI**


Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618


 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No  
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## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **SAFI, ROOZCHEHR**

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641


Provider English Spoken: Y


Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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SAN MARCOS, CA 92069

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736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

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### **FAMILY PRACTICE**

#### **SAFI, ROOZCHEHR**

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641


Provider English Spoken: Y


Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **SAFI, ROOZCHEHR**

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641


Provider English Spoken: Y


Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **WILLIE, KADEN**

Provider ID: 206426

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767


Provider English Spoken: Y


Provider Language(s)  
Spoken: Portuguese

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **WILLIE, KADEN**

Provider ID: 206426

Provider Gender: Male


License Number: 20A17306


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 1790133767

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Portuguese


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### **WILLIE, KADEN**

Provider ID: 206426

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Portuguese


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

### FQHC

#### **TRUECARE,**

Provider ID: 206426


NPI: 1245246917

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### FQHC

#### **TRUECARE,**

Provider ID: 206426


NPI: 1811617939

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### FQHC

#### **TRUECARE,**

Provider ID: 206426


NPI: 1598484255

 Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM





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## C. 初级保健目录








<hr/> <p style="text-align: center;"><b>FQHC</b></p> <hr/> <p><b>TRUECARE,</b>            Provider ID: 614511            NPI: 1598484255</p> <p> Provider English Spoken: Y            Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 1595 GRAND AVE STE 106            SAN MARCOS, CA 92078</p> <p> Phone: (760) 736-6767   Fax: (760) 736-6744</p> <p> After Hours Phone: (760)            736-6767</p> <p> Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL):            N</p> <p> Accessibility: CONTACT            PROVIDER</p> <p> Hours: M-F 8AM-5PM</p>	<p>Min/Max Age: 0\None            American Sign Language (ASL):            N</p> <p> Accessibility: CONTACT            PROVIDER</p> <p> Hours: M-F 8AM-5PM</p>	<p>Spoken: Polish            Cultural Competency: N            Hospital Affiliation: SCRIPPS            MEMORIAL HOSPITAL            ENCINITAS            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 150 VALPREDA RD            SAN MARCOS, CA 92069</p> <p> Phone: (760) 736-6767   After Hours Phone: (760)            736-6767</p> <p> Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL):            N</p> <p> Accessibility: CONTACT            PROVIDER</p>
<hr/> <p style="text-align: center;"><b>FQHC</b></p> <hr/> <p><b>TRUECARE,</b>            Provider ID: 614511            NPI: 1811617939</p> <p> Provider English Spoken: Y            Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 1595 GRAND AVE STE 106            SAN MARCOS, CA 92078</p> <p> Phone: (760) 736-6767   Fax: (760) 736-6744</p> <p> After Hours Phone: (760)            736-6767</p> <p> Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>            Medi-Cal Open Panel: Yes</p>	<hr/> <p style="text-align: center;"><b>FQHC</b></p> <hr/> <p><b>TRUECARE,</b>            Provider ID: 614511            NPI: 1245246917</p> <p> Provider English Spoken: Y            Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 1595 GRAND AVE STE 106            SAN MARCOS, CA 92078</p> <p> Phone: (760) 736-6767   Fax: (760) 736-6744</p> <p> After Hours Phone: (760)            736-6767</p> <p> Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL):            N</p> <p> Accessibility: CONTACT            PROVIDER</p> <p> Hours: M-F 8AM-5PM</p>	<hr/> <p style="text-align: center;"><b>GENERAL PRACTICE</b></p> <hr/> <p><b>WITCZAK, IZABELA</b>            Provider ID: 206426            Provider Gender: Female            License Number: A71311            NPI: 1184735201</p> <p> Provider English Spoken: Y   Provider Language(s)            Spoken: Polish            Cultural Competency: N            Hospital Affiliation: SCRIPPS            MEMORIAL HOSPITAL            ENCINITAS            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 150 VALPREDA RD            SAN MARCOS, CA 92069</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### GENERAL PRACTICE

**WITCZAK, IZABELA**  
 Provider ID: 206426  
 Provider Gender: Female  
 License Number: A71311  
 NPI: 1184735201  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Polish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 150 VALPREDA RD  
 SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

### PROVIDER

#### INTERNAL MEDICINE

**PONIACHIK, SAMUEL**  
 Provider ID: 206426  
 Provider Gender: Male  
 License Number: G74757  
 NPI: 1467485078  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 150 VALPREDA RD  
 SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
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#### INTERNAL MEDICINE

**PONIACHIK, SAMUEL**  
 Provider ID: 206426  
 Provider Gender: Male  
 License Number: G74757  
 NPI: 1467485078  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
 SAN MARCOS, CA 92069  
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 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

**PONIACHIK, SAMUEL**  
 Provider ID: 206426  
 Provider Gender: Male  
 License Number: G74757  
 NPI: 1467485078  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 150 VALPREDA RD  
 SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **OBSTETRICS / GYNECOLOGY**


#### **MOSTOFIAN, EIMANEH**

*Provider ID: 206426*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*


*Hospital Affiliation: TRI CITY*


*MEDICAL CTR, PALOMAR*

*MEDICAL CENTER*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *150 VALPREDA RD  
SAN MARCOS, CA 92069*

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*


 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-5PM*

---

### **OBSTETRICS / GYNECOLOGY**


#### **MOSTOFIAN, EIMANEH**

*Provider ID: 206426*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N*


*Hospital Affiliation: TRI CITY*


*MEDICAL CTR, PALOMAR*


*MEDICAL CENTER*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *150 VALPREDA RD  
SAN MARCOS, CA 92069*

 *Phone: (760) 736-6767*

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*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-5PM*

---

### **OBSTETRICS / GYNECOLOGY**


#### **MOSTOFIAN, EIMANEH**

*Provider ID: 206426*

*Provider Gender: Female*

*License Number: A97181*

*NPI: 1154477628*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Farsi, Spanish*


*Cultural Competency: N*


*Hospital Affiliation: TRI CITY*

*MEDICAL CTR, PALOMAR  
MEDICAL CENTER*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

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 *Phone: (760) 736-6767*

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 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 8AM-5PM*

---

### **OBSTETRICS / GYNECOLOGY**

#### **POUNTNEY, MARLENE**

*Provider ID: 206426*

*Provider Gender: Female*

*License Number: A93248*

*NPI: 1174703680*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*


*Hospital Affiliation: TRI CITY*

*MEDICAL CTR, PALOMAR*

*MEDICAL CENTER*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *150 VALPREDA RD  
SAN MARCOS, CA 92069*

 *Phone: (760) 736-6767*

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## C. 初级保健目录

☎ *After Hours Phone: (760) 736-6767*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **POUNTNEY, MARLENE**

*Provider ID: 206426*  
*Provider Gender: Female*  
*License Number: A93248*  
*NPI: 1174703680*

☐ *Provider English Spoken: Y*  
☐ *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

📍 *150 VALPREDA RD  
SAN MARCOS, CA 92069*  
☎ *Phone: (760) 736-6767*  
☎ *After Hours Phone: (760) 736-6767*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **POUNTNEY, MARLENE**

*Provider ID: 206426*  
*Provider Gender: Female*  
*License Number: A93248*  
*NPI: 1174703680*

☐ *Provider English Spoken: Y*  
☐ *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

📍 *150 VALPREDA RD  
SAN MARCOS, CA 92069*  
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☎ *After Hours Phone: (760) 736-6767*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **SCHWEIKERT, SUZANNE**

*Provider ID: 206426*  
*Provider Gender: Female*  
*License Number: A60958*  
*NPI: 1477560142*

☐ *Provider English Spoken: Y*  
☐ *Provider Language(s)*

*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR MEDICAL CENTER*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

📍 *150 VALPREDA RD  
SAN MARCOS, CA 92069*  
☎ *Phone: (760) 736-6767*  
☎ *After Hours Phone: (760) 736-6767*

🌐 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM  
SA 8AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **SCHWEIKERT, SUZANNE**

*Provider ID: 206426*  
*Provider Gender: Female*  
*License Number: A60958*  
*NPI: 1477560142*

☐ *Provider English Spoken: Y*  
☐ *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI*

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## C. 初级保健目录

CITY MEDICAL CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
PALOMAR MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **SCHWEIKERT, SUZANNE**

Provider ID: 206426

Provider Gender: Female

License Number: A60958

NPI: 1477560142

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
PALOMAR MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PEDIATRICS**

#### **MALHOTRA, ARATI**

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)  
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Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **MALHOTRA, ARATI**

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
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Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N






Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **MALHOTRA, ARATI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

Provider ID: 206426  
 Provider Gender: Female  
 License Number: A63903  
 NPI: 1215135306  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hindi, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY  
 MEDICAL CTR, PALOMAR  
 MEDICAL CENTER  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 150 VALPRED A RD  
 SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
 736-6767  
 Website: www.ihpsocal.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **PEDIATRICS**




#### **MATIAS, JULIE**




Provider ID: 661065  
 Provider Gender: Female  
 NPI: 1083094510  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH

NETWORK  
 150 VALPRED A RD  
 SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 Fax: (760) 736-6797  
 After Hours Phone: (760)  
 736-6767  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Offers Gender-Affirming Care

### **PEDIATRICS**






#### **MONAHAN, CAROLYN**

Provider ID: 50425  
 Provider Gender: Female  
 NPI: 1619973666  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: PALOMAR  
 MEDICAL CENTER  
 Board Certified Specialty: Yes  
 RADY CHILDRENS HEALTH  
 NETWORK  
 1582 W SAN MARCOS  
 BLVD STE 203  
 SAN MARCOS, CA 92078  
 Phone: (760) 744-6710  
 Fax: (760) 744-6156  
 After Hours Phone: (760)

744-6710  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **POSADAS, EMERITO**

Provider ID: 303661  
 Provider Gender: Male  
 NPI: 1720093198  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish, Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY  
 MEDICAL CTR, PALOMAR  
 MEDICAL CENTER  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 150 VALPRED A RD  
 SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 Fax: (760) 566-1501  
 After Hours Phone: (760)  
 736-6767  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
Hours: M-F 8AM-6PM

---

### **PEDIATRICS**

#### **POSADAS, EMERITO**

Provider ID: 206426  
Provider Gender: Male  
License Number: A48980  
NPI: 1720093198

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

---

### **PEDIATRICS**

#### **POSADAS, EMERITO**

Provider ID: 206426  
Provider Gender: Male  
License Number: A48980  
NPI: 1720093198

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

---

### **PEDIATRICS**

#### **POSADAS, EMERITO**

Provider ID: 206426  
Provider Gender: Male  
License Number: A48980  
NPI: 1720093198

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

---

### **PEDIATRICS**

#### **QUINTERO, CAROLYN**

Provider ID: 614767  
Provider Gender: Female  
NPI: 1023033156

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-8740  
 After Hours Phone: (760)  
736-6767  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Hours: M-F 8AM-6PM  
SA 8AM-5PM

---

### PEDIATRICS

---

#### SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### PEDIATRICS

---


#### SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

---

### PEDIATRICS

---

#### SEBIANE, MARIA


Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL

CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

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 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

---

### PEDIATRICS

---

#### SOCHA, TRACI

Provider ID: 428861

Provider Gender: Female

NPI: 1669478616

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 1582 W SAN MARCOS  
BLVD STE 203

 SAN MARCOS, CA 92078

 Phone: (760) 744-6710

Fax: (760) 744-6156

 After Hours Phone: (760)  
744-6710

 Website: N/A


Medi-Cal Open Panel: Yes


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## C. 初级保健目录

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-4:45PM

### **PHYSICIANS ASSISTANT**



#### **BERNARDO, RACHELLE**

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**


#### **BERNARDO, RACHELLE**

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**


#### **BERNARDO, RACHELLE**


Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes










Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

PROVIDER	Board Certified Specialty: No	PHYSICIANS ASSISTANT
<b>PHYSICIANS ASSISTANT</b>	<i>IHP OF SOUTHERN CAL-PHP</i>	<b>PHYSICIANS ASSISTANT</b>
<b>CHISWICK, GARY</b>		<b>KOSEL, MATTHEW</b>
Provider ID: 206426	 150 VALPRED A RD SAN MARCOS, CA 92069	Provider ID: 206426
Provider Gender: Male	 Phone: (760) 736-6767	Provider Gender: Male
License Number: PA22667	 After Hours Phone: (760) 736-6767	License Number: PA17101
NPI: 1174964001	 Website: www.ihpsocal.org	NPI: 1316947302
<input type="checkbox"/> Provider English Spoken: Y	Medi-Cal Open Panel: Yes	<input type="checkbox"/> Provider English Spoken: Y
Cultural Competency: N	Min/Max Age: 0\None	Cultural Competency: N
Hospital Affiliation:	American Sign Language (ASL): N	Board Certified Specialty: No
GROSSMONT HOSPITAL	 Accessibility: CONTACT PROVIDER	<i>IHP OF SOUTHERN CAL-PHP</i>
Board Certified Specialty: No		 150 VALPRED A RD SAN MARCOS, CA 92069
<i>IHP OF SOUTHERN CAL-PHP</i>	<b>PHYSICIANS ASSISTANT</b>	 Phone: (760) 736-6767
 150 VALPRED A RD SAN MARCOS, CA 92069	<b>KOSEL, MATTHEW</b>	 After Hours Phone: (760) 736-6767
 Phone: (760) 736-6767	Provider ID: 206426	 Website: www.ihpsocal.org
 After Hours Phone: (760) 736-6767	Provider Gender: Male	Medi-Cal Open Panel: Yes
 Website: www.ihpsocal.org	License Number: PA17101	Min/Max Age: 0\None
Medi-Cal Open Panel: Yes	NPI: 1316947302	American Sign Language (ASL): N
Min/Max Age: 0\None	<input type="checkbox"/> Provider English Spoken: Y	 Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N	Cultural Competency: N	
 Accessibility: CONTACT PROVIDER	Board Certified Specialty: No	<b>PHYSICIANS ASSISTANT</b>
	<i>IHP OF SOUTHERN CAL-PHP</i>	<b>PHYSICIANS ASSISTANT</b>
<b>PHYSICIANS ASSISTANT</b>	 150 VALPRED A RD SAN MARCOS, CA 92069	<b>KOSEL, MATTHEW</b>
<b>CHISWICK, GARY</b>	 Phone: (760) 736-6767	Provider ID: 206426
Provider ID: 206426	 After Hours Phone: (760) 736-6767	Provider Gender: Male
Provider Gender: Male	 Website: www.ihpsocal.org	License Number: PA17101
License Number: PA22667	Medi-Cal Open Panel: Yes	NPI: 1316947302
NPI: 1174964001	Min/Max Age: 0\None	<input type="checkbox"/> Provider English Spoken: Y
<input type="checkbox"/> Provider English Spoken: Y	American Sign Language (ASL): N	Cultural Competency: N
Cultural Competency: N	 Accessibility: CONTACT PROVIDER	Board Certified Specialty: No
Hospital Affiliation:		<i>IHP OF SOUTHERN CAL-PHP</i>
GROSSMONT HOSPITAL		 150 VALPRED A RD SAN MARCOS, CA 92069
		 Phone: (760) 736-6767

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## C. 初级保健目录

📞 After Hours Phone: (760) 736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **RUSSO, KRISTA**

Provider ID: 206426

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

📄 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

📞 Phone: (760) 736-6767

📞 After Hours Phone: (760) 736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **RUSSO, KRISTA**

Provider ID: 206426

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

📄 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

📞 Phone: (760) 736-6767

📞 After Hours Phone: (760) 736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **RUSSO, KRISTA**

Provider ID: 206426

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

📄 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

📞 Phone: (760) 736-6767

📞 After Hours Phone: (760)

736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **SPENCE, JAMIE**

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

📄 Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

📞 Phone: (760) 736-6767

📞 After Hours Phone: (760) 736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SPENCE, JAMIE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SPENCE, JAMIE**

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **TAHRIRI, BAHAREH**

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387


Provider English Spoken: Y


Provider Language(s)  
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **TAHRIRI, BAHAREH**

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387


Provider English Spoken: Y


Provider Language(s)  
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
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 Phone: (760) 736-6767


 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **TAHRIRI, BAHAREH**

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-5PM

### PODIATRIST

**DASGUPTA, DEBORSHI**

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y

Provider Language(s)  
Spoken: Bengali, Hindi,  
Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL,

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

FRESNO HEART AND

SURGICAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106

SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PODIATRIST

**DASGUPTA, DEBORSHI**

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y

Provider Language(s)  
Spoken: Bengali, Hindi,  
Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL,

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

FRESNO HEART AND

SURGICAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106

SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PODIATRIST

**DASGUPTA, DEBORSHI**

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y

Provider Language(s)  
Spoken: Bengali, Hindi,  
Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL,

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

FRESNO HEART AND

SURGICAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106

SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

### SAN YSIDRO

#### CARDIOVASCULAR DISEASE


##### PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

#### CERTIFIED NURSE PRACTITIONER


##### CELIZ, ADRIANA

Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [https://www.syhealth.org/locations](http://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

#### CERTIFIED NURSE PRACTITIONER


##### CHAUSSE CASTRO, EKATERINA

Provider ID: 227469

Provider Gender: Female

License Number: NP95018617

NPI: 1154040418

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

#### CERTIFIED NURSE PRACTITIONER

##### GARCIA, TEDAYSHIA

Provider ID: 206292

Provider Gender: Female

License Number: NP95003355

NPI: 1659730778

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

- center  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**


---

#### **GUADARRAMA, IGNACIO**


Provider ID: 227469  
Provider Gender: Male  
License Number: NP95003671  
NPI: 1821331174

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **HACINAS, REYNALDO**

Provider ID: 206292  
Provider Gender: Male  
License Number: NP95003024  
NPI: 1215304860

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

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#### **IBARRA, MARTHA**

Provider ID: 227469  
Provider Gender: Female  
License Number: NP12112  
NPI: 1114957289


Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **IBARRA, MARTHA**

Provider ID: 206292  
Provider Gender: Female  
License Number: NP12112  
NPI: 1114957289

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA




Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173



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## C. 初级保健目录

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM



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**CERTIFIED NURSE**  
**PRACTITIONER**



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**KANTAS, PARIS**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: NP18661  
 NPI: 1114329612  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM


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**CERTIFIED NURSE**  
**PRACTITIONER**

---



**ORDINANZA, MYLENE**

Provider ID: 227469  
 Provider Gender: Female  
 License Number: NP95019995  
 NPI: 1265019061

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: <https://www.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

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**CERTIFIED NURSE**  
**PRACTITIONER**


---

**PITTMAN, LILIANA**

Provider ID: 227469  
 Provider Gender: Female  
 License Number: NP95017732  
 NPI: 1326599002  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


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**CERTIFIED NURSE**  
**PRACTITIONER**



---

**SANCHEZ, MYRNA**

Provider ID: 227469  
 Provider Gender: Female  
 License Number: NP95003721  
 NPI: 1548614506

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP


 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173

 Phone: (619) 662-4100  
 After Hours Phone: (619)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **VAZQUEZ-ERLBECK, MARTHA**

Provider ID: 227469

Provider Gender: Female

License Number: NP95001960

NPI: 1669865960


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CHIROPRACTOR**

---

#### **OCHOA, RAUL**

Provider ID: 206292

Provider Gender: Male

License Number: DC33693

NPI: 1518401827


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

---

#### **CRUZ, MICHAEL**

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **ALGHAMDI, ASMA**

Provider ID: 227469

Provider Gender: Female


License Number: A167529


NPI: 1316310840

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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## C. 初级保健目录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


**ALVAREZ-ESTRADA, MIGUEL**

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL, PARADISE VALLEY HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


**ALVAREZ-ESTRADA, MIGUEL**

Provider ID: 227411

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL, PARADISE VALLEY HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

### **FAMILY PRACTICE**

**ARRIETA, NOEMI**

Provider ID: 206292

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**

**BAUM, PETER**


Provider ID: 227411

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish





Cultural Competency: N

Board Certified Specialty: No

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## C. 初级保健目录

IHP OF SOUTHERN CAL-PHP


 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

### **FAMILY PRACTICE**


**BORSAN, COSMIN**


Provider ID: 206292

Provider Gender: Male

License Number: 20A17643

NPI: 1679060255


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Romanian


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**


**CAMPOS, MELISSA**

Provider ID: 227411

Provider Gender: Female

License Number: A138474

NPI: 1427475318

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

### **FAMILY PRACTICE**

**CARRIEDO-CENICEROS, MARIA**

Provider ID: 206292

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**CASTILLO, STEPHANIE**

Provider ID: 206292

Provider Gender: Female






License Number: A159673

NPI: 1902330723

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

### **FAMILY PRACTICE**

#### **CEVALLOS, JAMES**


*Provider ID: 206292*  
*Provider Gender: Male*  
*License Number: A55469*  
*NPI: 1720181829*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD

SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
*Fax: (619) 205-6341*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**








#### **CORONADO, MYRNA**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A112627*  
*NPI: 1710147566*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

#### **CORONADO, MYRNA**

*Provider ID: 227411*  
*Provider Gender: Female*  
*License Number: A112627*  
*NPI: 1710147566*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4050 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: syhealth.org/clinics/maternal-child-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*








### **FAMILY PRACTICE**

#### **DALUGDUGAN, ESTHER**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A112511*  
*NPI: 1962662718*





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## C. 初级保健目录

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Tagalog*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**






#### **DAVIS, CHARLES**



*Provider ID: 206292*  
*Provider Gender: Male*  
*License Number: G41219*  
*NPI: 1194840231*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**

#### **ESTRADA, JOHANNA**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A127188*  
*NPI: 1255698155*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

### **FAMILY PRACTICE**

#### **HEINRICI, ALEKA**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A125329*  
*NPI: 1780979120*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p><b>FAMILY PRACTICE</b></p> <p><b>HENDRIX, JEFFERSON</b>            Provider ID: 227469            Provider Gender: Male            License Number: A32571            NPI: 1235142738</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Spanish            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 3364 BEYER BLVD            SAN YSIDRO, CA 92173   Phone: (619) 662-4100   After Hours Phone: (619) 662-4100   Website: <a href="https://www.syhealth.org/locations">https://www.syhealth.org/locations</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p>Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 3364 BEYER BLVD            SAN YSIDRO, CA 92173   Phone: (619) 662-4100   After Hours Phone: (619) 662-4100   Website: <a href="https://www.syhealth.org/locations">https://www.syhealth.org/locations</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p>American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>
<p><b>FAMILY PRACTICE</b></p> <p><b>HERNANDEZ, RALPH</b>            Provider ID: 227469            Provider Gender: Male            License Number: C42207            NPI: 1285782151</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Spanish            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4004 BEYER BLVD            SAN YSIDRO, CA 92173   Phone: (619) 662-4100   After Hours Phone: (619) 662-4100   Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p><b>FAMILY PRACTICE</b></p> <p><b>HERNANDEZ, RALPH</b>            Provider ID: 206292            Provider Gender: Male            License Number: C42207            NPI: 1285782151</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Spanish            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4004 BEYER BLVD            SAN YSIDRO, CA 92173   Phone: (619) 662-4100   After Hours Phone: (619) 662-4100   Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p><b>FAMILY PRACTICE</b></p> <p><b>KAUFHOLD, ANNE</b>            Provider ID: 206292            Provider Gender: Female            License Number: A88893            NPI: 1164508073</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Arabic, Spanish            Cultural Competency: N            Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4004 BEYER BLVD            SAN YSIDRO, CA 92173   Phone: (619) 662-4100   After Hours Phone: (619) 662-4100   Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>
		<p><b>FAMILY PRACTICE</b></p> <p><b>LARA, LESLEY</b></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 206292  
Provider Gender: Female  
License Number: A173435  
NPI: 1184112682

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM





### **FAMILY PRACTICE**

#### **LEE, JOSEPH**



Provider ID: 206292  
Provider Gender: Male  
License Number: A164201  
NPI: 1417480948

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: ST

ELIZABETH HOSP  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-6341  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM


### **FAMILY PRACTICE**



#### **LEE, JOSEPH**

Provider ID: 227469  
Provider Gender: Male  
License Number: A164201  
NPI: 1417480948

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: ST  
ELIZABETH HOSP  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)

662-4100  
 Website: <https://www.syhealth.org/locations>  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **LEPEZ, DAVID**

Provider ID: 206292  
Provider Gender: Male  
License Number: A130348  
NPI: 1205196029

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

<p>N   <i>Accessibility: CONTACT PROVIDER</i></p>	<p><b><u>FAMILY PRACTICE</u></b></p>	<p>NPI: 1952563421   <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Filipino, Spanish, Tagalog</i></p>
<p><b><u>FAMILY PRACTICE</u></b></p>	<p><b>MOYA, MARY</b></p>	<p><i>Cultural Competency: N</i></p>
<p><b>LEUTE, ERIC</b>  <i>Provider ID: 206292</i>  <i>Provider Gender: Male</i>  <i>License Number: A80832</i>  <i>NPI: 1720171507</i></p>	<p><i>Provider ID: 206292</i>  <i>Provider Gender: Female</i>  <i>License Number: A80185</i>  <i>NPI: 1093844417</i>   <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i></p>	<p><i>Cultural Competency: N</i>  <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR</i></p>
<p> <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p>	<p><i>Cultural Competency: N</i>  <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i>  <i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p>	<p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i>   3364 BEYER BLVD  SAN YSIDRO, CA 92173   <i>Phone: (619) 662-4100</i>   <i>After Hours Phone: (619) 662-4100</i>   <i>Website: <a href="https://www.syhealth.org/locations">https://www.syhealth.org/locations</a></i></p>
<p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i>   4004 BEYER BLVD  SAN YSIDRO, CA 92173   <i>Phone: (619) 662-4100</i>   <i>After Hours Phone: (619) 662-4100</i>   <i>Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a></i></p>	<p> 4004 BEYER BLVD  SAN YSIDRO, CA 92173   <i>Phone: (619) 662-4100</i>   <i>After Hours Phone: (619) 662-4100</i>   <i>Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a></i></p>	<p><i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i></p>
<p><i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL):</i></p>	<p><i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL):</i></p>	<p><i>American Sign Language (ASL):</i></p>
<p>N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5:30PM SA 8:30AM-2PM</i></p>	<p><b><u>FAMILY PRACTICE</u></b></p> <p><b>NAVARRO, VANESSA MARIA</b>  <i>Provider ID: 227469</i>  <i>Provider Gender: Female</i>  <i>License Number: A113624</i></p>	<p><b><u>FAMILY PRACTICE</u></b></p> <p><b>NGUYEN, CARIE</b>  <i>Provider ID: 206292</i>  <i>Provider Gender: Female</i>  <i>License Number: A106103</i>  <i>NPI: 1174781132</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</i>  <i>Board Certified Specialty: No</i></p>

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## C. 初级保健目录

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**


**NIKZAD, JASON**

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

/clinics/san-ysidro-health  
- center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**


**ORTEGA, LUIS**

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**

**ORTIZ, KENNETH**

Provider ID: 206292

Provider Gender: Male

License Number: A156607


NPI: 1356761571


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**ORTIZ ILIZALITURRI, ANA**

Provider ID: 206292

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female

License Number: A178949

NPI: 1316407026

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **ORTIZ ILIZALITURRI, ANA**

Provider ID: 227411

Provider Gender: Female

License Number: A178949

NPI: 1316407026

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

### **FAMILY PRACTICE**

#### **RAJAIPOUR, NEGIN**

Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **RAJAIPOUR, NEGIN**

Provider ID: 206292

Provider Gender: Female

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): NPI: 1245645076

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

---

### **FAMILY PRACTICE**

---

#### **RITTER, STEVEN**

Provider ID: 206292

Provider Gender: Male


License Number: 20A7435


NPI: 1356556021


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**


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#### **ROJAS, SARAH**

Provider ID: 206292

Provider Gender: Female


License Number: A139169


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

---

### **FAMILY PRACTICE**

---



#### **ROJAS, STEVEN**

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


 Provider English Spoken: Y  
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

---

### **FAMILY PRACTICE**

---

#### **ROSENBAUM, HERBERT**

Provider ID: 206292

Provider Gender: Male

License Number: A169694

NPI: 1922532712


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):

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## C. 初级保健目录

N

 **Accessibility: CONTACT PROVIDER**  
 **Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM**

### **FAMILY PRACTICE**


#### **SALEM, RAMSEY**

*Provider ID: 206292*


*Provider Gender: Male*


*License Number: A158364*


*NPI: 1245401298*

 **Provider English Spoken: Y**  
**Cultural Competency: N**  
**Board Certified Specialty: No**  
**IHP OF SOUTHERN CAL-PHP**

 **4004 BEYER BLVD  
SAN YSIDRO, CA 92173**

 **Phone: (619) 662-4100**

 **After Hours Phone: (619)  
662-4100**


 **Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)**

**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\None**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT PROVIDER**

### **FAMILY PRACTICE**


#### **SHAHTAJI, ALAN**

*Provider ID: 206292*


*Provider Gender: Male*


*License Number: 20A11087*


*NPI: 1972751089*


 **Provider English Spoken: Y**  
**Cultural Competency: N**  
**Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON**

**Board Certified Specialty: No**  
**IHP OF SOUTHERN CAL-PHP**

 **4004 BEYER BLVD  
SAN YSIDRO, CA 92173**

 **Phone: (619) 662-4100**

 **After Hours Phone: (619)  
662-4100**

 **Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)**

**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\None**

**American Sign Language (ASL):**

N  
 **Accessibility: CONTACT PROVIDER**

### **FAMILY PRACTICE**



#### **SNYDER, CHRISTOPHER**

*Provider ID: 206292*

*Provider Gender: Male*

*License Number: 20A7502*

*NPI: 1922041235*

 **Provider English Spoken: Y**  
 **Provider Language(s)  
Spoken: Spanish**


**Cultural Competency: N**


**Hospital Affiliation: PIH**


**Hospital - Downey, JOHN F  
KENNEDY MEMORIAL HOSP,  
CEDARS SINAI MEDICAL**

**CENTER, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
EISENHOWER MEDICAL CTR,  
GROSSMONT HOSPITAL**  
**Board Certified Specialty: No**  
**IHP OF SOUTHERN CAL-PHP**

 **4004 BEYER BLVD  
SAN YSIDRO, CA 92173**

 **Phone: (619) 662-4100**

 **After Hours Phone: (619)  
662-4100**

 **Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)**

**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\None**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT PROVIDER**

### **FAMILY PRACTICE**


#### **STALEY, MICHAELA**

*Provider ID: 206292*


*Provider Gender: Female*


*License Number: A157772*

*NPI: 1912438250*

 **Provider English Spoken: Y**  
**Cultural Competency: N**  
**Board Certified Specialty: No**  
**IHP OF SOUTHERN CAL-PHP**

 **4004 BEYER BLVD  
SAN YSIDRO, CA 92173**

 **Phone: (619) 662-4100**

 **After Hours Phone: (619)  
662-4100**

 **Website: [www.syhealth.org](http://www.syhealth.org)**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*/clinics/san-ysidro-health-center*  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **SWEET, PATRICK**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: A101827  
 NPI: 1457407702  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Hours: M-TU 8:30AM-5:30PM  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### **FAMILY PRACTICE**

#### **TALAVERA, GREGORY**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: A40061  
 NPI: 1740337161  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

### **FAMILY PRACTICE**

#### **TAN, LO FU**

Provider ID: 227469  
 Provider Gender: Male  
 License Number: C170935  
 NPI: 1356314835  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: <https://www.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **TREJO, RAUL**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: A77936  
 NPI: 1174534184  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### UTZ, JACK

Provider ID: 206292

Provider Gender: Male

License Number: A183145

NPI: 1194353094

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

/clinics/san-ysidro-health  
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### VAN HOLLEBEKE, RACHEL

Provider ID: 206292

Provider Gender: Female

License Number: A177337

NPI: 1497217756

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### FAMILY PRACTICE

#### VELASQUEZ, SHARON

Provider ID: 206292

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FQHC

**SAN YSIDRO HEALTH  
MATERNAL AND CHILD  
HEALTH CTR,**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 227411

NPI: 1558852947

☐ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-1967

🕒 After Hours Phone: (619)  
662-4100

🌐 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

### FQHC

#### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,**

Provider ID: 206292

NPI: 1952364747

☐ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619)  
662-4100

🌐 Website: [www.syhealth.org/clinics/san-ysidro-health](http://www.syhealth.org/clinics/san-ysidro-health)

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### FQHC

#### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,**

Provider ID: 227469

NPI: 1801438239

☐ Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

📍 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

🕒 After Hours Phone: (619)  
662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

### GENERAL PRACTICE

#### **REYNAGA, JOSUE**

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)  
662-4100

🌐 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### GENERAL PRACTICE

#### **TEJEDA, FRANCISCO**

Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075


☐ Provider English Spoken: Y

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## C. 初级保健目录

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*



 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### GYNECOLOGY

#### **CALDERON, JORGE**

*Provider ID: 206292*  
*Provider Gender: Male*  
*License Number: A40480*  
*NPI: 1407800881*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, LOMPOC VALLEY MEDICAL CENTER*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD



SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*




### INFECTIOUS DISEASE


#### **PROMER, KATHERINE**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A131952*  
*NPI: 1306280607*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER*


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san-ysidro-health-center*



*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

### INTERNAL MEDICINE

#### **ALDOUS, JEANNETTE**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A101017*  
*NPI: 1073650339*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

#### **CARPENTER III, ROBERT**

*Provider ID: 206292*

*Provider Gender: Male*

*License Number: 20A10964*


*NPI: 1356343040*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM*

### **INTERNAL MEDICINE**


#### **CHEN, TSUH-YIN**


*Provider ID: 206292*

*Provider Gender: Female*

*License Number: C55563*

*NPI: 1093803520*


 *Provider English Spoken: Y*


 *Provider Language(s)  
Spoken: Portuguese,  
Spanish*

*Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*


*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

*Fax: (619) 205-6341*

 *After Hours Phone: (619) 662-4100*

 *Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**


#### **CHOW, MAN HUNG**

*Provider ID: 227469*

*Provider Gender: Female*

*License Number: G66745*

*NPI: 1225149115*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP*


*CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS*


*MEMORIAL HOSPITAL,*

*SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

#### **DE LA ROSA, JOSE**

*Provider ID: 206292*

*Provider Gender: Male*

*License Number: A49267*

*NPI: 1689646572*

 *Provider English Spoken: Y*  
*Cultural Competency: N*






*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*






 4004 BEYER BLVD



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## C. 初级保健目录






 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER



### **INTERNAL MEDICINE**

**DILLON, BENEDICT**  
 Provider ID: 227411  
 Provider Gender: Male  
 License Number: A111118  
 NPI: 1710142708  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, CHULA VISTA  
 COMM HOSP  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4050 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**

**HURST, MICHAEL**  
 Provider ID: 206292  
 Provider Gender: Male  
 License Number: 20A8081  
 NPI: 1205893104  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SUTTER  
 TRACY COMMUNITY HOSP,  
 SCRIPPS MEMORIAL  
 HOSPITAL  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-8PM  
 SA 8AM-2PM

### **INTERNAL MEDICINE**

**KAUFER, DAVID**  
 Provider ID: 206292  
 Provider Gender: Male  
 License Number: G80107  
 NPI: 1710082789  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM  
 SA 8:30AM-2PM

### **INTERNAL MEDICINE**

**KAUFER, DAVID**  
 Provider ID: 227469

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## C. 初级保健目录

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **LAMANTIA, MICHELE**

Provider ID: 206292

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **MAY, LOUIS**

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **PARK, DANIEL**

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### INTERNAL MEDICINE

#### **POAST, JENNIFER**

Provider ID: 206292



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## C. 初级保健目录




*Provider Gender: Female*  
*License Number: 20A8245*  
*NPI: 1164435681*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san- ysidro- health - center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*





### **INTERNAL MEDICINE**

**RAMIREZ SANCHEZ, CLAUDIA**  
*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A160493*  
*NPI: 1659720555*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Board Certified Specialty: No*

**IHP OF SOUTHERN CAL-PHP**  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san- ysidro- health - center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

**REDDY, SAMATHHA**  
*Provider ID: 227469*  
*Provider Gender: Female*  
*License Number: A120797*  
*NPI: 1659620854*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Gujarati, Hindi, Punjabi, Spanish, Telugu*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, ST AGNES MEDICAL CENTER*  
*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**  
 3364 BEYER BLVD

SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: https://www.syhealth.org/locations*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

#### **SALERNO, MARIANA**

*Provider ID: 206292*  
*Provider Gender: Female*  
*License Number: A131021*  
*NPI: 1598921645*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: Providence St. Joseph Hospital Eureka*  
*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san- ysidro- health - center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**


#### **SCHNEIDER-MUNOZ, MARGARITA**

*Provider ID: 206292*

*Provider Gender: Female*

*License Number: G81461*

*NPI: 1821299520*


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**


#### **SHEIKH MOHAMED, AMIRA**


*Provider ID: 227469*

*Provider Gender: Female*

*License Number: A153975*

*NPI: 1831583079*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

*MEMORIAL HOSPITAL,*

*SCRIPPS MERCY HOSPITAL*


*CHULA VISTA*


*Board Certified Specialty: No*


*IHP OF SOUTHERN CAL-PHP*

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **INTERNAL MEDICINE**


#### **SY, RAMON**

*Provider ID: 227469*

*Provider Gender: Male*

*License Number: A51843*

*NPI: 1982617403*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*


*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL,  
PARADISE VALLEY HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

### **INTERNAL MEDICINE**

#### **VELAZQUEZ CAMARENA, MARIA**

*Provider ID: 206292*

*Provider Gender: Female*

*License Number: A56153*

*NPI: 1518965714*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*



*MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*


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## C. 初级保健目录

 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

#### **WEN, AKI YEN CHANG**


Provider ID: 227411  
 Provider Gender: Male  
 License Number: 20A12555  
 NPI: 1205126505  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

**PROVIDER**  
 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE GERIATRIC MEDICINE







#### **PANDIT, IVY**

Provider ID: 206292  
 Provider Gender: Female  
 License Number: C53735  
 NPI: 1891796165  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: KAISER  
 FOUNDATION HOSPITAL  
 RIVERSIDE, RIVERSIDE  
 COUNTY REGIONAL MED CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 205-1950  
 After Hours Phone: (619)  
 205-1950  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM  
 SA 8:30AM-2PM

### INTERVENTIONAL CARDIOLOGY

#### **MOUSSAVIAN, MEHRAN**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: 20A7241  
 NPI: 1689788234  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 CHULA VISTA MED CTR, TRI  
 CITY MEDICAL CTR, SHARP  
 MEMORIAL HOSPITAL,  
 ALVARADO HOSPITAL LLC,  
 GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MERCY HOSPITAL, SCRIPPS  
 MEMORIAL HOSPITAL,  
 Adventist Health and Rideout  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 Fax: (619) 205-6341  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

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 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **ANDERSON, MANDY**

*Provider ID: 227411*

*Provider Gender: Female*


*License Number: A113914*


*NPI: 1982812392*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*

### **OBSTETRICS / GYNECOLOGY**


#### **BERGGREN, ERICA**

*Provider ID: 227411*

*Provider Gender: Female*

*License Number: C158543*


*NPI: 1912159674*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL*


*HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*

### **OBSTETRICS / GYNECOLOGY**


#### **CARR, MIANDA**

*Provider ID: 227411*

*Provider Gender: Female*


*License Number: A104660*


*NPI: 1083815823*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **CARR, MIANDA**

*Provider ID: 206292*

*Provider Gender: Female*

*License Number: A104660*

*NPI: 1083815823*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录






CHULA VISTA, SCRIPPS  
MERCY HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**



#### **CARSON, LATISA**

Provider ID: 206292  
Provider Gender: Female  
License Number: A72235  
NPI: 1245229129  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)


662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER



### **OBSTETRICS / GYNECOLOGY**

#### **DANESHMAND, SHAHRAM**

Provider ID: 227411  
Provider Gender: Male  
License Number: A63844  
NPI: 1891867412  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi, Spanish



Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, SCRIPPS GREEN  
HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-1948  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **DANESHMAND, SHAHRAM**


Provider ID: 206292  
Provider Gender: Male  
License Number: A63844  
NPI: 1891867412  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, SCRIPPS GREEN  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **OBSTETRICS / GYNECOLOGY**


#### **DINH, MY**

Provider ID: 206292

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

 Provider English Spoken: Y

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DINH, MY**

Provider ID: 227411





Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**



#### **GOLDSTEIN, EDWARD**

Provider ID: 227411

Provider Gender: Male



License Number: G20087

NPI: 1982617494


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-1948

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **GOMEZ, DANIELA**

*Provider ID: 227411*


*Provider Gender: Female*


*License Number: A175006*


*NPI: 1255878997*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: syhealth.org/clinics/maternal-child-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **GOMEZ, DANIELA**

*Provider ID: 206292*


*Provider Gender: Female*


*License Number: A175006*


*NPI: 1255878997*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM*  
*SA 8:30AM-2PM*

### **OBSTETRICS / GYNECOLOGY**

#### **JENKINS, ENCHANTA**

*Provider ID: 227411*

*Provider Gender: Female*

*License Number: C143625*

*NPI: 1285604702*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS*  
*MERCY HOSPITAL CHULA*

*VISTA, SCRIPPS MERCY*  
*HOSPITAL*


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)*

*662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **MENDEZ, DIEGO**

*Provider ID: 227411*

*Provider Gender: Male*

*License Number: A47906*

*NPI: 1437181922*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: MERCY*  
*GENERAL HOSPITAL, SCRIPPS*

*MERCY HOSPITAL CHULA*  
*VISTA, BAKERSFIELD*

*MEMORIAL HOSP, SHARP*

*MEMORIAL HOSPITAL,*

*Adventist Health Bakersfield,*

*SCRIPPS MERCY HOSPITAL,*

*SCRIPPS MEMORIAL*

*HOSPITAL, SCRIPPS*

*MEMORIAL HOSPITAL, KERN*



*MEDICAL CENTER*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD




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## C. 初级保健目录

SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **SEFA-BOAKYE, KOFI**


Provider ID: 206292  
 Provider Gender: Male  
 License Number: G59670  
 NPI: 1902993660  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**




#### **SHORT, ABIADÉ**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: A114893  
 NPI: 1750559589  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OPHTHALMOLOGY**

#### **MANI, NASRIN**

Provider ID: 227469  
 Provider Gender: Female  
 License Number: A40473  
 NPI: 1023061314  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: <https://www.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

PROVIDER	License Number: A74960 NPI: 1801971569	Phone: (619) 662-4100 Fax: (619) 205-1948
<b>OPHTHALMOLOGY</b>		
<b>SKAF, AYHAM</b>		
Provider ID: 227469 Provider Gender: Male License Number: A120584 NPI: 1285888628	Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	After Hours Phone: (619) 662-4100 Website: syhealth.org/clinics/maternal-child-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N
3364 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 Website: <a href="https://www.syhealth.org/locations">https://www.syhealth.org/locations</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	4050 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 Website: syhealth.org/clinics/maternal-child-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	Website: syhealth.org/clinics/maternal-child-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER
<b>PEDIATRICS</b>		
<b>ACEVEDO, SUSANA</b>		
Provider ID: 227411 Provider Gender: Female	Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	After Hours Phone: (619) 662-4100 Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None
<b>PEDIATRICS</b>		
<b>BARBADILLO, FERDINAND</b>		
Provider ID: 227411 Provider Gender: Male License Number: A49307 NPI: 1982662193	Provider English Spoken: Y Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	After Hours Phone: (619) 662-4100 Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None
<b>PEDIATRICS</b>		
<b>BARBADILLO, FERDINAND</b>		
Provider ID: 206292 Provider Gender: Male License Number: A49307 NPI: 1982662193	Provider English Spoken: Y Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	After Hours Phone: (619) 662-4100 Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): **CHAIT LLAMAS, LWBBA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU  
8:30AM-5:30PM

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### PEDIATRICS

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**CABARLO, JEHRIB**

Provider ID: 227411

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### PEDIATRICS

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Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PIONEERS


MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### PEDIATRICS

---


**FUJII, CINDY**


Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### PEDIATRICS

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**GHAHREMANI, SIMIN**


Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA


MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### **PEDIATRICS**







#### **HERMAN, ANDREA**



Provider ID: 227411  
 Provider Gender: Female  
 License Number: A72721  
 NPI: 1518970037  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4050 BEYER BLVD SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 Fax: (619) 205-1948  
 After Hours Phone: (619) 662-4100  
 Website: [syhealth.org/clinic](http://syhealth.org/clinic)

s/maternal- child- health- center  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **NISSAN, BETI**

Provider ID: 206292  
 Provider Gender: Female  
 License Number: A64487  
 NPI: 1396705299  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Farsi, Persian  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### **PEDIATRICS**

#### **PIANSAY, MARIA CORAZON**

Provider ID: 206292  
 Provider Gender: Female  
 License Number: A93785  
 NPI: 1669680351  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish, Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **RODRIGUEZ, ALDO**

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### **PEDIATRICS**

### **RUELAS, ROBERTO**

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### **PEDIATRICS**

### **SAHMS, TIMOTHY**

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-7:30PM  
SA 8:30AM-2PM

#### **PEDIATRICS**

### **SAHMS, TIMOTHY**

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

American Sign Language (ASL): *Cultural Competency: N*  
N

 *Accessibility: CONTACT PROVIDER*

---

### **PEDIATRICS**

#### **SHAHIDYAZDANI, TINA**

*Provider ID: 227411*


*Provider Gender: Female*


*License Number: A94813*


*NPI: 1891924858*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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### **PEDIATRICS**


#### **SULLIVAN, ELISSA**

*Provider ID: 227411*


*Provider Gender: Female*


*License Number: A169577*


*NPI: 1790216422*


 *Provider English Spoken: Y*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: syhealth.org/clinics/maternal-child-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*

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### **PEDIATRICS**



#### **TAYLOR, TASHA**

*Provider ID: 227411*

*Provider Gender: Female*

*License Number: A82187*


*NPI: 1528144433*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

*Fax: (619) 205-1948*


 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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### **PHYSICIANS ASSISTANT**

#### **BUCKNER, JOSEPH**

*Provider ID: 206292*

*Provider Gender: Male*


*License Number: PA18363*


*NPI: 1215909205*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

---

### **PHYSICIANS ASSISTANT**

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## C. 初级保健目录

### GI, HUNG

Provider ID: 206292

Provider Gender: Male

License Number: PA16994


NPI: 1023207404


Provider English Spoken: Y


Provider Language(s)  
Spoken: Chinese, French,  
Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

### HARMIS, NATASHA

Provider ID: 227469

Provider Gender: Female

License Number: PA58672

NPI: 1013516996

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### PHYSICIANS ASSISTANT

### KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162

NPI: 1447326459

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

### PORTO MADURSKI, KRISTINE

Provider ID: 227411

Provider Gender: Female

License Number: PA16269

NPI: 1053403782

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

### ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

Provider English Spoken: Y


Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### SHARPE, NORMA


Provider ID: 206292  
Provider Gender: Female  
License Number: PA20490  
NPI: 1619100237  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### SMITH, DOUGLAS

Provider ID: 206292  
Provider Gender: Male  
License Number: PA12304  
NPI: 1902016611  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### SUNA-SITTO, MOHEEN



Provider ID: 227469  
Provider Gender: Female  
License Number: PA22855  
NPI: 1497196729

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### TRUJILLO, MIGUEL

Provider ID: 206292  
Provider Gender: Male  
License Number: PA15656  
NPI: 1285806794  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

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## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

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### PODIATRIST

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#### **MANCHEL, BRUCE**

Provider ID: 227469

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP

CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

### PODIATRIST

---


#### **MANCHEL, BRUCE**

Provider ID: 206292

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341


 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

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### REGISTERED PHYSICAL THERAPIST

---

#### **TORRES, JOANN**

Provider ID: 206292

Provider Gender: Female


License Number: PT296607


NPI: 1134732522


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

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### SPEECH PATHOLOGIST

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#### **HILL, CARLA**

Provider ID: 206292

Provider Gender: Female


License Number: SP9075


NPI: 1043950751


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

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## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### SURGERY GENERAL

#### **OKWUOSA, CHRIS**

Provider ID: 206292

Provider Gender: Male

License Number: A170738


NPI: 1114336260


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Providence  
St Mary Medical Center

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **SANTEE**


### PEDIATRICS


#### **ARLATA, TAMANTHA**

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 9600 CUYAMACA ST STE  
101

SANTEE, CA 92071

 Phone: (619) 749-2150

Fax: (619) 456-9744

 After Hours Phone: (619)  
749-2150

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


### PEDIATRICS

#### **MANGINE, REGINA**

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9600 CUYAMACA ST STE  
101

SANTEE, CA 92071

 Phone: (619) 749-2150

Fax: (619) 456-9744

 After Hours Phone: (619)  
749-2150

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **SPRING VALLEY**

### CERTIFIED NURSE

### PRACTITIONER

#### **LEONARD, BEVERLY**


Provider ID: 206361

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

 Provider English Spoken: Y

 Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **WILLIAMS, TAKISHA**

Provider ID: 206361

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **BACHARACH, REBECCA**

Provider ID: 206361

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **CARDONES, ARTHUR**

Provider ID: 206361

Provider Gender: Male

License Number: A55932

NPI: 1962436451

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **CONSTANTINO, STEPHANIE**

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No


FAMILY HEALTH CENTERS OF  
SAN DIEGO

8788 JAMACHA RD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

SPRING VALLEY, CA 91977  
 Phone: (619) 515-2555  
 After Hours Phone: (619) 515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
 TU 8:30AM-7PM  
 W-F 8:30AM-5:30PM

### FAMILY PRACTICE

#### **ROSE, PATRICIA**

Provider ID: 206361

Provider Gender: Female


License Number: A76059


NPI: 1588677314


 Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 8788 JAMACHA RD  
 SPRING VALLEY, CA 91977


 Phone: (619) 515-2555


 After Hours Phone: (619) 515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
 TU 8:30AM-7PM  
 W-F 8:30AM-5:30PM

### FQHC

#### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,**


Provider ID: 206361

NPI: 1508801069

 Provider English Spoken: Y  
 Cultural Competency: N


FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 8788 JAMACHA RD  
 SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

Fax: (619) 462-5584

 After Hours Phone: (619) 515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

### OBSTETRICS / GYNECOLOGY



#### **ALIMONOS, LYSISTRATI**

Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,  
 SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 8788 JAMACHA RD  
 SPRING VALLEY, CA 91977

 Phone: (619) 515-2555


 After Hours Phone: (619) 515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM  
 TU 8:30AM-7PM  
 W-F 8:30AM-5:30PM

### OBSTETRICS / GYNECOLOGY

#### **BUECHNER, CHARLENE**

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SHARP MARY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**BIRCH HOSP FOR WOMEN  
AND NEWBORNS**  
Board Certified Specialty: No  
**FAMILY HEALTH CENTERS OF  
SAN DIEGO**

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

**FAMILY HEALTH CENTERS OF  
SAN DIEGO**

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-5:30PM  
TU 8:30AM-7PM

W-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

**FAMILY HEALTH CENTERS OF  
SAN DIEGO**

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
**FAMILY HEALTH CENTERS OF  
SAN DIEGO**

8788 JAMACHA RD  
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)  
515-2555

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**

Provider ID: 206361

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)

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## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
8788 JAMACHA RD  
SPRING VALLEY, CA 91977  
Phone: (619) 515-2555  
After Hours Phone: (619) 515-2555  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **FOLCH TORRES-AGUIAR, BEATRIZ**

Provider ID: 206361  
Provider Gender: Female  
License Number: A148014  
NPI: 1457794752  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish, Yue Chinese  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital,

**SCRIPPS MERCY HOSPITAL CHULA VISTA**  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
8788 JAMACHA RD  
SPRING VALLEY, CA 91977  
Phone: (619) 515-2555  
After Hours Phone: (619) 515-2555  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 206361  
Provider Gender: Female  
License Number: C174771  
NPI: 1053392035  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital  
Board Certified Specialty: No  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
8788 JAMACHA RD

SPRING VALLEY, CA 91977  
Phone: (619) 515-2555  
After Hours Phone: (619) 515-2555  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**

Provider ID: 206361  
Provider Gender: Female  
License Number: A72005  
NPI: 1649208711  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish

*Cultural Competency: N*  
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
8788 JAMACHA RD  
SPRING VALLEY, CA 91977  
Phone: (619) 515-2555  
After Hours Phone: (619) 515-2555  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-7PM  
W-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **LOEFFLER, ALLISON**

Provider ID: 206361

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555


 After Hours Phone: (619)  
515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-7PM  
W-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206361

Provider Gender: Male

License Number: A154298

NPI: 1710316450

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)  
515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F

8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **SAPRA, SONIA**


Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977


 Phone: (619) 515-2555

 After Hours Phone: (619)  
515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198



 Provider English Spoken: Y


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Hospital Affiliation: Sharp*  
*Grossmont Hospital*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*  
 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**



*Provider ID: 206361*  
*Provider Gender: Female*  
*License Number: 20A11535*  
*NPI: 1811162456*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR*  
*Board Certified Specialty: No*

#### **FAMILY HEALTH CENTERS OF SAN DIEGO**


 8788 JAMACHA RD  
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*  
 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:30AM-5:30PM*  
*TU 8:30AM-7PM*  
*W-F 8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **ZIEG, ALAN**

*Provider ID: 206361*  
*Provider Gender: Male*  
*License Number: G78814*  
*NPI: 1699790634*



 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation:*


*GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL*  
*CHULA VISTA*

*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 8788 JAMACHA RD


SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*  
 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*

### **PEDIATRICS**



#### **Jl, AMANDA**


*Provider ID: 206361*  
*Provider Gender: Female*  
*License Number: A169342*  
*NPI: 1750745493*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977














 *Phone: (619) 515-2555*  
 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N   <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Provider ID: 519918</i>  <i>NPI: 1437335148</i></p>	<p><i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i></p>
<b>PHYSICIANS ASSISTANT</b>		
<b>TRAN, TU-UYEN</b>		
<p><i>Provider ID: 206361</i>  <i>Provider Gender: Female</i>  <i>License Number: PA54588</i>  <i>NPI: 1598293748</i></p>		
<p> <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Vietnamese</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i></p>		
<p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p>		
<p> 8788 JAMACHA RD            SPRING VALLEY, CA 91977</p>		
<p> <i>Phone: (619) 515-2555</i>   <i>After Hours Phone: (619) 515-2555</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i></p>		
<p> <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M 8:30AM-5:30PM</i>  <i>TU 8:30AM-7PM</i>  <i>W-F 8:30AM-5:30PM</i></p>		
<b>VALLEY CENTER</b>		
<b>CLINIC OUTPATIENT</b>		
<b>NEIGHBORHOOD HEALTHCARE,</b>		
<p> <i>Provider English Spoken: Y</i>   <i>Cultural Competency: N</i>  <i>IHP OF SOUTHERN CAL-PHP</i></p>		
<p> 28477 LIZARD ROCKS RD            VALLEY CENTER, CA 92082</p>		
<p> <i>Phone: (760) 742-9919</i>  <i>Fax: (360) 462-2750</i>   <i>After Hours Phone: (760) 742-9919</i>   <i>Website: N/A</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i></p>		
<p> <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i></p>		
<b>FAMILY PRACTICE</b>		
<b>AYON MARTINEZ, CARLOS</b>		
<p><i>Provider ID: 519918</i>  <i>Provider Gender: Male</i>  <i>License Number: A114419</i>  <i>NPI: 1154583128</i></p>		
<p> <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i></p>		
<p><i>IHP OF SOUTHERN CAL-PHP</i></p>		
<p> 28477 LIZARD ROCKS RD            VALLEY CENTER, CA 92082</p>		
<p> <i>Phone: (760) 742-9919</i>   <i>After Hours Phone: (760) 742-9919</i>   <i>Website: N/A</i></p>		
<p><i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i></p>		
<p> <i>Accessibility: CONTACT PROVIDER</i></p>		
<b>FAMILY PRACTICE</b>		
<b>CASTANER, ZALYA</b>		
<p><i>Provider ID: 519918</i>  <i>Provider Gender: Female</i>  <i>License Number: A139490</i>  <i>NPI: 1487072179</i></p>		
<p> <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: PALOMAR MEDICAL CENTER</i>  <i>Board Certified Specialty: No</i></p>		
<p><i>IHP OF SOUTHERN CAL-PHP</i></p>		
<p> 28477 LIZARD ROCKS RD            VALLEY CENTER, CA 92082</p>		
<p> <i>Phone: (760) 742-9912</i>   <i>After Hours Phone: (760) 742-9912</i>   <i>Website: N/A</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i></p>		
<p> <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i></p>		
<b>FAMILY PRACTICE</b>		
<b>SCHULTZ, JAMES</b>		
<p><i>Provider ID: 519918</i>  <i>Provider Gender: Male</i></p>		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

License Number: G61829

NPI: 1356376164

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Greek,  
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
PALOMAR MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

28477 LIZARD ROCKS RD  
VALLEY CENTER, CA 92082

Phone: (760) 742-9919

After Hours Phone: (760)  
742-9919

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FQHC

**NEIGHBORHOOD  
HEALTHCARE,**

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

28477 LIZARD ROCKS RD

VALLEY CENTER, CA 92082

Phone: (760) 742-9919

Fax: (360) 462-2750

After Hours Phone: (760)  
742-9919

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

**CRAYCHEE, LEO**

Provider ID: 71887

Provider Gender: Male

NPI: 1265432710

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

28714 VALLEY CENTER RD  
STE L

VALLEY CENTER, CA 92082

Phone: (760) 749-7770

Fax: (760) 751-9988

After Hours Phone: (760)  
749-7770

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

### PHYSICIANS ASSISTANT

**AGUEY, OMAR**

Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

28477 LIZARD ROCKS RD  
VALLEY CENTER, CA 92082

Phone: (760) 742-9919

After Hours Phone: (760)  
742-9919

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **VISTA**

CERTIFIED NURSE

PRACTITIONER

**HALGEDAHL, YI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 400339  
Provider Gender: Female  
License Number: NP95006826  
NPI: 1619246907

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **KELLEHER, BRIDGET**

Provider ID: 400339  
Provider Gender: Female  
License Number: NP95003447  
NPI: 1245695006

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **WILLIAMS, JINA**

Provider ID: 400339  
Provider Gender: Female  
License Number: NP95020624  
NPI: 1225500259

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

[nityclinic.org](http://nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### **JU, NATHANIEL**

Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

### FAMILY PRACTICE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **ESPINOSA-SILVA, YAMINAH**

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL

CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### **FAMILY PRACTICE**

### **KETCHEL, CLINT**

Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Spanish,  
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI

CITY MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

#### **FQHC**

### **VCC DURIAN,**

Provider ID: 411518

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A

VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)  
308-5003

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

#### **FQHC**

### **VISTA COMMUNITY CLINIC**

#### **GRAPEVINE,**

Provider ID: 400339

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

### **INTERNAL MEDICINE**

#### **CHEN, MAX**

Provider ID: 411518  
Provider Gender: Male  
License Number: A78887  
NPI: 1285750356  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Burmese, Chinese,  
Mandarin, Spanish,  
Taiwanese

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A  
VISTA, CA 92083  
Phone: (844) 308-5003  
After Hours Phone: (844)  
308-5003  
Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8:30AM-5PM

### **PEDIATRICS**

#### **AMANI, RAMIN**

Provider ID: 79901  
Provider Gender: Male

NPI: 1659366292  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi, Persian,  
Spanish

Cultural Competency: N  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

950 CIVIC CENTER DR STE  
A  
VISTA, CA 92083  
Phone: (760) 439-4839  
Fax: (760) 439-4841  
After Hours Phone: (760)  
439-4839

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-TU 9AM-4PM  
W 9AM-0PM  
TH-F 9AM-4PM

### **PEDIATRICS**

#### **AMBO, STANLEY**

Provider ID: 52269  
Provider Gender: Male  
NPI: 1891735676  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2067 W VISTA WAY STE 180  
VISTA, CA 92083  
Phone: (760) 945-3434  
Fax: (760) 945-6761  
After Hours Phone: (760)  
945-3434

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **ASSELIN, LYNETTE**

Provider ID: 65507  
Provider Gender: Female  
NPI: 1053484568

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish


Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2067 W VISTA WAY STE  
280  
VISTA, CA 92083


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Phone: (760) 941-3630  
Fax: (760) 941-1214


 After Hours Phone: (760) 941-3630

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-6PM SA 9AM-1PM

### **PEDIATRICS**


#### **BEDROSIAN, DIANE**


Provider ID: 80272  
Provider Gender: Female  
NPI: 1447323951

 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish


Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2067 W VISTA WAY STE 280  
VISTA, CA 92083


 Phone: (760) 941-3630  
Fax: (760) 941-1214

 After Hours Phone: (760) 941-3630

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-6PM SA 9AM-1PM

### **PEDIATRICS**

#### **CASTRO, JORGE**


Provider ID: 100779  
Provider Gender: Male  
NPI: 1326082868

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2067 W VISTA WAY STE 180  
VISTA, CA 92083


 Phone: (760) 945-3434  
Fax: (760) 945-6761

 After Hours Phone: (760) 945-3434

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


### **PEDIATRICS**



#### **HARTFORD, NICOLE**


Provider ID: 411518  
Provider Gender: Female  
License Number: 20A14390  
NPI: 1346530466

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE A  
VISTA, CA 92083

 Phone: (844) 308-5003  
 After Hours Phone: (844) 308-5003

 Website: www.vistacommu  
nityclinic.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **KARP, MICHAEL**

Provider ID: 95672  
Provider Gender: Male  
NPI: 1295808632

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

2067 W VISTA WAY STE  
280

VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)  
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-6PM  
SA 9AM-1PM

### **PEDIATRICS**

#### **KRAK, MICHAEL**

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH  
NETWORK

2067 W VISTA WAY STE  
280

VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)  
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-6PM  
SA 9AM-1PM

### **PEDIATRICS**

#### **LUSCHWITZ, BRIAN**

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM

W-F 8AM-5PM

### **PEDIATRICS**

#### **NAUDIN, VERONICA**

Provider ID: 84118

Provider Gender: Female

NPI: 1093755878

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2067 W VISTA WAY STE 180  
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)  
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-0PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


### **PEDIATRICS**

#### **PERTL, URSULA**

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

CHILDRENS HOSP OF LOS


ANGELES

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 2067 W VISTA WAY STE 180  
VISTA, CA 92083

 Phone: (760) 945-3434

Fax: (760) 945-6761

 After Hours Phone: (760)  
945-3434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 10AM-2PM

M-F 8AM-5PM

SA 8AM-0PM

### **PEDIATRICS**


#### **RONAN, KEVIN**

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM

TU 10:30AM-7:30PM

W-F 8AM-5PM

### **PHYSICIANS ASSISTANT**


#### **WEAVER, APRIL**


Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-2PM  
F 8AM-5PM

SA 8AM-4PM

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## D. 专家名录

### ALPINE

#### OPTOMETRIST

##### AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (800) 898-2020  
Fax: (844) 897-3788

After Hours Phone: (800)  
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### PSYCHOLOGIST

##### TORRES, RANDALL

Provider ID: 306854

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1871696435

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### BRAWLEY

#### PEDIATRIC CARDIOLOGY

##### SILVA SEPULVEDA, JOSE

Provider ID: 256218

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

207 W LEGION RD  
BRAWLEY, CA 92227

Phone: (760) 351-3291  
After Hours Phone: (760)  
351-3291

Provider Gender: Male

NPI: 1417222472

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### SURGERY PEDIATRIC

##### THANGARAJAH, HARIHARAN

Provider ID: 256195

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

207 W LEGION RD  
BRAWLEY, CA 92227

Phone: (760) 351-7643  
After Hours Phone: (760)  
351-7643

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

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## D. 专家名录

Network

### CAMPO

#### FAMILY PRACTICE

##### BAUM, PETER

Provider ID: 296383

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### FAMILY PRACTICE

##### ROGERS, MATTHEW

Provider ID: 294843

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1639606130

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CARLSBAD

#### CERTIFIED NURSE

#### PRACTITIONER

##### HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD  
STE 120  
CARLSBAD, CA 92011

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)

884-5990

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

#### CERTIFIED NURSE

#### PRACTITIONER

##### RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD  
STE 200  
CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)  
631-3000

Provider Gender: Female

NPI: 1902470537

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None



American Sign Language (ASL):  
N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC


### DERMATOLOGY

#### ZUBAIR, RAHEEL



Provider ID: 306519  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 6010 HIDDEN VALLEY RD  
STE 120  
CARLSBAD, CA 92011  
 Phone: (760) 448-4484  
Fax: (760) 448-4404  
 After Hours Phone: (760)  
448-4484  
Provider Gender: Male  
NPI: 1326493024  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC






### FAMILY PRACTICE

#### CHAVEZ-SANTOS, MARIA

Provider ID: 307651  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1295 CARLSBAD VILLAGE

DR STE 100  
CARLSBAD, CA 92008




 Phone: (760) 736-6767  
Fax: (760) 736-6744  
 After Hours Phone: (760)  
736-6767

Provider Gender: Female  
NPI: 1780061440  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### HEARING AID DEALER / SUPPLIER


#### DAVIS, KELLE

Provider ID: 268654  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1820 MARRON RD STE 102  
CARLSBAD, CA 92008  
 Phone: (760) 434-0125  
Fax: (760) 434-4531  
 After Hours Phone: (760)  
434-0125  
Provider Gender: Female  
NPI: 1902853344  
 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8:30AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### NEUROLOGY

#### DROKER, BRIAN

Provider ID: 306953  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 6010 HIDDEN VALLEY RD  
STE 200  
CARLSBAD, CA 92011  
 Phone: (760) 631-3000  
Fax: (760) 270-9534  
 After Hours Phone: (760)  
631-3000  
Provider Gender: Male  
NPI: 1801112669  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M 8AM-5PM  
W 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### NEUROLOGY

#### YOSHII-CONTRERAS, JUNE

Provider ID: 296589

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2390 FARADAY AVE  
CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)  
631-3000

Provider Gender: Female

NPI: 1437441763

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

TRI CITY MEDICAL CTR,

SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### OTOLARYNGOLOGY

#### DONALDSON, CHADWICK

Provider ID: 268146

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2390 FARADAY AVE  
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)  
909-0770

Provider Gender: Male

NPI: 1891743910

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
TEMECULA VALLEY HOSPITAL

INC, SCRIPPS MEMORIAL

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### PHYSICIANS ASSISTANT

#### HERMANSON, KATHLEEN

Provider ID: 269004

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD  
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)  
631-3000

Provider Gender: Female

NPI: 1598160343

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

### PHYSICIANS ASSISTANT

#### INOCELDA, ANDREW

Provider ID: 269089

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD  
STE 200

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

CARLSBAD, CA 92011  
☎ Phone: (760) 631-3000  
Fax: (760) 631-3016  
🕒 After Hours Phone: (760) 631-3000  
Provider Gender: Male  
NPI: 1497950208  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **PHYSICIANS ASSISTANT**

**SHIMIZU, KELSIE MIDORI**  
Provider ID: 296819  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 2390 FARADAY AVE  
CARLSBAD, CA 92008  
☎ Phone: (858) 909-0770  
Fax: (858) 909-0880  
🕒 After Hours Phone: (858) 909-0770  
Provider Gender: Female  
NPI: 1972107811  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: KECK  
HOSPITAL OF USC, USC  
KENNETH NORRIS JR

CANCER HOSPITAL, USC  
VERDUGO HILLS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

**WILAND, WINONA**  
Provider ID: 296809  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 2390 FARADAY AVE  
CARLSBAD, CA 92008  
☎ Phone: (858) 909-0770  
Fax: (858) 909-0880  
🕒 After Hours Phone: (858) 909-0770  
Provider Gender: Female  
NPI: 1043967383  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

**AMBROSE, CHRISTOPHER**  
Provider ID: 248010  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 3070 MADISON ST  
CARLSBAD, CA 92008  
☎ Phone: (760) 434-6100  
Fax: (760) 471-5139  
🕒 After Hours Phone: (760) 591-7750  
Provider Gender: Male  
NPI: 1114977535  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 8\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M 7AM-7PM  
TU 7AM-5PM  
W 7AM-7PM  
TH 7AM-5PM  
F 7AM-7PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **REGISTERED PHYSICAL THERAPIST**

**MCGEE, JACQUELINE**  
Provider ID: 252472  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 3070 MADISON ST

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## D. 专家名录

CARLSBAD, CA 92008  
☎ Phone: (760) 434-6100  
Fax: (760) 434-4583  
🕒 After Hours Phone: (760) 434-6100  
Provider Gender: Female  
NPI: 1194217133  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 8\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 7AM-6PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **SURGERY NEUROLOGICAL**

**BEN-HAIM, SHARONA**  
Provider ID: 244069  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6010 HIDDEN VALLEY RD  
STE 200  
CARLSBAD, CA 92011  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1942469663  
🗣️ Provider English Spoken: Y  
🗣️ Provider Language(s)  
Spoken: Hebrew, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

**BLASKIEWICZ, DONALD**  
Provider ID: 270283  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6010 HIDDEN VALLEY RD  
STE 200  
CARLSBAD, CA 92011  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1215176839  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**  
Provider ID: 299996  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6010 HIDDEN VALLEY RD  
STE 200  
CARLSBAD, CA 92011  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1710371273  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

**PHAM, MARTIN**  
Provider ID: 203510  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6010 HIDDEN VALLEY RD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

STE 200  
CARLSBAD, CA 92011  
☎ Phone: (619) 543-5540  
📞 After Hours Phone: (619) 543-5540  
Provider Gender: Male  
NPI: 1609130921  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### CHULA VISTA

#### ANESTHESIOLOGY PAIN MANAGEMENT

**DAIRO, BRANDON**  
Provider ID: 299879  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 340 4TH AVE STE 19  
CHULA VISTA, CA 91910  
☎ Phone: (619) 761-5308  
Fax: (619) 591-1910  
📞 After Hours Phone: (619) 761-5308  
Provider Gender: Male

NPI: 1689092470  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\100  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### ANESTHESIOLOGY PAIN MANAGEMENT

**DAIRO, BRANDON**  
Provider ID: 300088  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 340 4TH AVE STE 19  
CHULA VISTA, CA 91910  
☎ Phone: (619) 761-5308  
Fax: (619) 591-1910  
📞 After Hours Phone: (619) 761-5308  
Provider Gender: Male  
NPI: 1689092470  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### CARDIOVASCULAR DISEASE

**LERNER, JONATHAN**  
Provider ID: 303445  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 765 MEDICAL CENTER CT  
STE 211  
CHULA VISTA, CA 91911  
☎ Phone: (619) 616-2100  
Fax: (619) 616-2104  
📞 After Hours Phone: (619) 616-2100  
Provider Gender: Male  
NPI: 1962899823  
☑ Provider English Spoken: Y  
☑ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL): Provider ID: 290591

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---


### **CERTIFIED ACUPUNCTURIST**

#### **LAM, KHANH**

Provider ID: 295381

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 340 4TH AVE STE 19  
CHULA VISTA, CA 91910


 Phone: (619) 761-5308

Fax: (619) 591-1910

 After Hours Phone: (619)  
761-5308

Provider Gender: Male

NPI: 1649594979

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese, French,  
Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### **CERTIFIED ACUPUNCTURIST**

#### **WILCOX, WENONAH**


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1598037178

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE**

#### **PRACTITIONER**


#### **BRAYTENBAH, MELANIE**

Provider ID: 268746

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 752 MEDICAL CENTER CT  
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)  
421-3361

Provider Gender: Female

NPI: 1508370875


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

---

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **BRAYTENBAH, MELANIE**


Provider ID: 262342

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

 752 MEDICAL CENTER CT  
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)  
421-3361

Provider Gender: Female

NPI: 1508370875

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL): IHP of Southern Cal-PHP,  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

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### **CERTIFIED NURSE PRACTITIONER**

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#### **BRAYTENBAH, MELANIE**

Provider ID: 295830

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 752 MEDICAL CENTER CT  
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)  
421-3361

Provider Gender: Female

NPI: 1508370875


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

Imperial Health Holdings  
Medical Group-SD

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### **CERTIFIED NURSE PRACTITIONER**


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#### **CARAPIA, FABIOLA**

Provider ID: 295918

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 340 4TH AVE STE 4  
CHULA VISTA, CA 91910

 Phone: (619) 427-1144

Fax: (619) 427-1185

 After Hours Phone: (619)  
427-1144

Provider Gender: Female

NPI: 1184905994


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

---

### **CERTIFIED NURSE PRACTITIONER**


---

#### **CARAPIA, FABIOLA**


Provider ID: 54496

Board Certified Specialty: No  
BALBOA NEPHROLOGY MED  
GRP INC

 340 4TH AVE STE 4  
CHULA VISTA, CA 91910

 Phone: (619) 427-1144

Fax: (619) 427-1185

 After Hours Phone: (619)  
427-1144

Provider Gender: Female

NPI: 1184905994


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

---

### **CERTIFIED NURSE PRACTITIONER**


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#### **CARRION GELABERT, ANA**

Provider ID: 302402

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 450 FOURTH AVE STE 215  
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 425-3842

 After Hours Phone: (619)  
425-3840

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female

NPI: 1023178233

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **DE DIOS, SARAH**

Provider ID: 302418

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

450 4TH AVE STE 215  
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 425-3842

After Hours Phone: (619)  
425-3840

Provider Gender: Female

NPI: 1528632742

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### **LANE, KIMBERLY**

Provider ID: 301598

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

752 MEDICAL CENTER CT  
STE 101

CHULA VISTA, CA 91911

Phone: (619) 397-4500

Fax: (858) 429-7931

After Hours Phone: (619)  
397-4500

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE

#### **DILLMAN, ARIANA**

Provider ID: 290495

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

333 H ST STE 2080

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (661) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1497067862

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: BEVERLY

HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F  
8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE

#### **EINSTEIN, ERIC**

Provider ID: 290482

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

333 H ST STE 2080

CHULA VISTA, CA 91910

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## D. 专家名录

 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619) 662-4100  
Provider Gender: Male  
NPI: 1154683787  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CORONA REGIONAL MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE






#### FRENCH, TONIANNE

Provider ID: 290538  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1770578411  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE




#### GALASSO, MADISON

Provider ID: 290477  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP  
 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1053766766  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


### EMERGENCY MEDICINE

#### GRIESINGER, MICHAEL

Provider ID: 290537  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP  
 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619) 662-4100


Provider Gender: Male

NPI: 1336556604

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Adventist Health Bakersfield, SAN JOAQUIN GENERAL HOSP  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PHAM, LILY

Provider ID: 304935

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

386 E H ST STE 202  
CHULA VISTA, CA 91910

Phone: (858) 966-1720

Fax: (858) 966-1725

After Hours Phone: (858)  
966-1720

Provider Gender: Female

NPI: 1811423072

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

### EMERGENCY MEDICINE

### QUENZER, FAITH

Provider ID: 290637

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

333 H ST STE 2080  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1295112670

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, UNIVERSITY  
HSP OF SAN DIEGO CO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### EMERGENCY MEDICINE

### REARDON, JACQUELINE

Provider ID: 290673

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

333 H ST STE 2080  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1417928557

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE

### ROXAS, ROGER

Provider ID: 290600

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

333 H ST STE 2080  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1578910840


Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### ENDOCRINOLOGY


### METABOLISM DIABETES

#### **CARRILLO, MARITZA**

Provider ID: 290970

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
Fax: (619) 425-1184

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1649628587

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 302757

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### FAMILY PRACTICE

#### **CONTAG, ALEC**

Provider ID: 307437

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 678 THIRD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
Fax: (619) 662-4196

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1215495627

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### FAMILY PRACTICE

#### **DEIS, CRISTINA**

Provider ID: 302757

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 1637 THIRD AVE STE H  
CHULA VISTA, CA 91911

 Phone: (619) 662-4100  
Fax: (619) 662-4196

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1639478811

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### FAMILY PRACTICE

#### **VELASQUEZ, SHARON**

Provider ID: 299164

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




 678 3RD AVE  
CHULA VISTA, CA 91910




 Phone: (619) 662-4100  
Fax: (619) 425-1184

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## D. 专家名录

 After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1972732584  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




### GASTROENTEROLOGY




**SHAFFER, KATHERINE**  
Provider ID: 305510  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 296 H ST STE 301  
CHULA VISTA, CA 91910  
 Phone: (619) 266-3332  
 After Hours Phone: (619) 266-3332  
Provider Gender: Female  
NPI: 1336405695  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP






### GASTROENTEROLOGY

**WIENER, GREGORY**  
Provider ID: 290741  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP  
 353 CHURCH AVE STE A  
CHULA VISTA, CA 91910  
 Phone: (619) 585-8883  
Fax: (619) 585-8892

 After Hours Phone: (619) 585-8883  
Provider Gender: Male  
NPI: 1811099534  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: French, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8:30AM-4:30PM F 8:30AM-3PM  
 Website: N/A  
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PHP




### GASTROENTEROLOGY

**WIENER, GREGORY**  
Provider ID: 257480  
Board Certified Specialty: Yes  
BLUE SHIELD PROMISE HEALTH PLAN DIRECT  
 353 CHURCH AVE STE A  
CHULA VISTA, CA 91910  
 Phone: (619) 585-8883  
Fax: (619) 585-8892  
 After Hours Phone: (619) 585-8883  
Provider Gender: Male  
NPI: 1811099534  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: French, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录




SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SHARP CHULA  
VISTA MED CTR, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH  
8:30AM-4:30PM  
F 8:30AM-3PM  
 Website: N/A  
IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT, IHP of  
Southern Cal-PHP

### GENERAL PRACTICE








#### **SAMI, REMAN**

Provider ID: 295214  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 425-1184  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1295362242  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### HEARING AID DEALER / SUPPLIER








#### **ANDERSON, ELAINE**

Provider ID: 268688  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 310 3RD AVE STE C11  
CHULA VISTA, CA 91910  
 Phone: (619) 426-0841  
Fax: (619) 426-9197  
 After Hours Phone: (619)  
426-0841  
Provider Gender: Female  
NPI: 1063558856  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### HEARING AID DEALER /

### SUPPLIER

#### **DAVIS, KELLE**

Provider ID: 268651  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 310 3RD AVE STE C11  
CHULA VISTA, CA 91910  
 Phone: (619) 426-0841  
Fax: (619) 426-9197  
 After Hours Phone: (619)  
426-0841  
Provider Gender: Female  
NPI: 1902853344  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8:30AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### HEMATOLOGY / ONCOLOGY

#### **JOHNSON, KENNETH**

Provider ID: 262288  
Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD  
 769 MEDICAL CENTER CT  
STE 202  
CHULA VISTA, CA 91911  
 Phone: (619) 482-8430  
Fax: (619) 482-8005  
 After Hours Phone: (619)

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## D. 专家名录

482-8430  
Provider Gender: Male  
NPI: 1063527711  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Imperial Health Holdings  
Medical Group-SD

### INTERVENTIONAL CARDIOLOGY

**MOHAMEDALI, BURHAN**  
Provider ID: 245576  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 765 MEDICAL CENTER CT  
STE 211  
CHULA VISTA, CA 91911  
 Phone: (619) 616-2100  
Fax: (619) 616-2104  
 After Hours Phone: (619)  
616-2100  
Provider Gender: Male  
NPI: 1831393289

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Swahili  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
Adventist Health and Rideout  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

**NAGHI, JESSE**  
Provider ID: 247625  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 752 MEDICAL CENTER CT  
STE 207  
CHULA VISTA, CA 91911  
 Phone: (619) 867-0557  
Fax: (619) 867-0558  
 After Hours Phone: (619)  
867-0557  
Provider Gender: Male  
NPI: 1386896736  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Bulgarian,  
Russian, Spanish, Tagalog  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, ALVARADO  
HOSPITAL LLC, SHARP CHULA  
VISTA MED CTR, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC




### INTERVENTIONAL CARDIOLOGY

**ROUGH, STEVEN**  
Provider ID: 298442  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 754 MEDICAL CENTER CT  
STE 101  
CHULA VISTA, CA 91911  
 Phone: (619) 434-4288  
Fax: (619) 434-4315  
 After Hours Phone: (619)  
434-4288  
Provider Gender: Male  
NPI: 1386821460  
 Provider English Spoken: Y

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## D. 专家名录

 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*CHULA VISTA MED CTR,*  
*SHARP MEMORIAL HOSPITAL,*  
*ALVARADO HOSP MED CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP,*  
*Imperial Health Holdings*  
*Medical Group-SD*



*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*CHULA VISTA MED CTR,*  
*SHARP MEMORIAL HOSPITAL,*  
*ALVARADO HOSP MED CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP,*  
*Imperial Health Holdings*  
*Medical Group-SD*




*Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
*MERCY HOSPITAL,*  
*GROSSMONT HOSPITAL,*  
*ALVARADO COMMUNITY*  
*HOSPITAL, SHARP MEMORIAL*  
*HOSPITAL, SCRIPPS*  
*MEMORIAL HOSPITAL,*  
*ALVARADO HOSPITAL LLC,*  
*SHARP CHULA VISTA MED*  
*CTR, SHARP CHULA VISTA*  
*MED CTR, TRI CITY MEDICAL*  
*CTR, SCRIPPS MERCY*  
*HOSPITAL CHULA VISTA,*  
*Sharp Grossmont Hospital*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

### INTERVENTIONAL CARDIOLOGY


**ROUGH, STEVEN**  
*Provider ID: 302985*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 754 MEDICAL CENTER CT  
 STE 101  
 CHULA VISTA, CA 91911  
 *Phone: (619) 434-4288*  
*Fax: (619) 434-4315*  
 *After Hours Phone: (619)*  
*434-4288*  
*Provider Gender: Male*  
*NPI: 1386821460*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*

### INTERVENTIONAL CARDIOLOGY

**SHEREV, DIMITRI**  
*Provider ID: 268950*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 752 MEDICAL CENTER CT  
 STE 207  
 CHULA VISTA, CA 91911  
 *Phone: (619) 867-0557*  
*Fax: (619) 867-0558*  
 *After Hours Phone: (619)*  
*867-0557*  
*Provider Gender: Male*  
*NPI: 1154323996*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Bulgarian, Russian,*

 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8:30AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*



### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**  
*Provider ID: 296051*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 765 MEDICAL CENTER CT  
 STE 211  
 CHULA VISTA, CA 91911

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## D. 专家名录

 Phone: (619) 616-2100  
 Fax: (619) 616-2104


 After Hours Phone: (619) 616-2100

Provider Gender: Female  
NPI: 1811307051

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 15\99

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP



### INTERVENTIONAL CARDIOLOGY

#### **SUDHAKAR, DEEPTHI**

Provider ID: 295846

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 765 MEDICAL CENTER CT  
STE 211  
CHULA VISTA, CA 91911

 Phone: (619) 616-2100  
 Fax: (619) 616-2104

 After Hours Phone: (619) 616-2100

Provider Gender: Female  
NPI: 1811307051


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP



### MATERNAL AND FETAL MEDICINE

#### **MCCULLOUGH, DEIRDRE**

Provider ID: 277263


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 Phone: (858) 966-6710  
 Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710

Provider Gender: Female  
NPI: 1639153018


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,

Sharp Grossmont Hospital,  
SHARP MEMORIAL HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network



### MATERNAL AND FETAL MEDICINE

#### **MELBER, DORA**

Provider ID: 296993

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 386 E H ST STE 202  
CHULA VISTA, CA 91910

 Phone: (858) 966-6710  
 Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710

Provider Gender: Female  
NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hungarian,  
Spanish


Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


### MATERNAL AND FETAL MEDICINE

#### **REIMERS, REBECCA**

Provider ID: 294653

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### MATERNAL AND FETAL MEDICINE

#### **RICHARDSON, ALVIE**

Provider ID: 264687

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Sharp Grossmont  
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### MATERNAL AND FETAL MEDICINE

#### **WESTERMANN, MELISSA**

Provider ID: 242523

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
EARL AND LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, SHARP  
MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes


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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
IPA: Rady Childrens Health Network

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE


#### **FLEMING, SARAH**

Provider ID: 205646

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 435 H ST  
CHULA VISTA, CA 91910

 Phone: (619) 691-7000

 After Hours Phone: (619) 691-7000

Provider Gender: Female

NPI: 1679809826

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE

#### **MATOBA, NANA**

Provider ID: 297976

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 435 H ST  
CHULA VISTA, CA 91910


 Phone: (619) 691-7000

Fax: (619) 260-7055

 After Hours Phone: (619) 691-7000

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE

#### **NIEMI, ANNA-KAISA**

Provider ID: 262159

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 435 H ST  
CHULA VISTA, CA 91910

 Phone: (858) 966-5818


Fax: (858) 966-7483

 After Hours Phone: (858) 966-5818

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Finnish, French,  
German, Spanish, Swedish

Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p align="center"><b><u>NEONATAL / PERINATAL MEDICINE</u></b></p>	<p><i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b></p>	<p><i>IPA: Rady Childrens Health Network</i></p>
<p><b>NYMAN, KATHERINE</b> <i>Provider ID: 301823</i> <i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b> 435 H ST CHULA VISTA, CA 91910 Phone: (619) 691-7000 Fax: (619) 260-7055 After Hours Phone: (619) 691-7000 <i>Provider Gender: Female</i> <i>NPI: 1003260951</i> Provider English Spoken: Y <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A <i>IPA: Rady Childrens Health Network</i></p>	<p>435 H ST CHULA VISTA, CA 91910 Phone: (619) 691-7000 Fax: (619) 260-7055 After Hours Phone: (619) 691-7000 <i>Provider Gender: Male</i> <i>NPI: 1801978143</i> Provider English Spoken: Y <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A</p>	<p align="center"><b><u>NEPHROLOGY</u></b></p> <p><b>HOREISH, ADAM</b> <i>Provider ID: 290100</i> <i>Board Certified Specialty: No</i> <b>IHP OF SOUTHERN CAL-PHP</b> 340 4TH AVE STE 4 CHULA VISTA, CA 91910 Phone: (619) 427-1144 Fax: (619) 427-1185 After Hours Phone: (619) 427-1144 <i>Provider Gender: Male</i> <i>NPI: 1760461206</i> Provider English Spoken: Y Provider Language(s) Spoken: Arabic, Spanish <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 18\None</i> <i>American Sign Language (ASL): N</i> Accessibility: CONTACT PROVIDER Hours: M-F 9AM-5PM Website: N/A <i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD</i></p>
<p align="center"><b><u>NEONATAL / PERINATAL MEDICINE</u></b></p>	<p><b>SPEZIALE, MARK</b> <i>Provider ID: 304829</i></p>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

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**NEPHROLOGY**

**HOREISH, ADAM**  
Provider ID: 99947  
Board Certified Specialty: No  
BALBOA NEPHROLOGY MED  
GRP INC  
340 4TH AVE STE 4  
CHULA VISTA, CA 91910  
Phone: (619) 427-1144  
Fax: (619) 427-1185  
After Hours Phone: (619)  
427-1144  
Provider Gender: Male  
NPI: 1760461206  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

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**NEPHROLOGY**

**HOREISH, ADAM**

Provider ID: 99947  
Board Certified Specialty: No  
BALBOA NEPHROLOGY MED  
GRP INC  
340 4TH AVE STE 4  
CHULA VISTA, CA 91910  
Phone: (619) 427-1144  
Fax: (619) 427-1185  
After Hours Phone: (619)  
427-1144  
Provider Gender: Male  
NPI: 1760461206  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

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**NEPHROLOGY**

**MOOLANI, UJJALA**  
Provider ID: 296069  
Board Certified Specialty: No

COMMUNITY CARE IPA LLC  
752 MEDICAL CENTER CT  
STE 302  
CHULA VISTA, CA 91911  
Phone: (619) 421-3361  
Fax: (619) 869-4378  
After Hours Phone: (619)  
421-3361  
Provider Gender: Female  
NPI: 1528221421  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Hindi, Sindhi,  
Spanish, Urdu  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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**NEPHROLOGY**

**MOOLANI, UJJALA**  
Provider ID: 295915  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
752 MEDICAL CENTER CT  
STE 302

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

CHULA VISTA, CA 91911  
☎ Phone: (619) 421-3361  
Fax: (619) 869-4378  
🕒 After Hours Phone: (619) 421-3361  
Provider Gender: Female  
NPI: 1528221421  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Hindi, Sindhi,  
Spanish, Urdu  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 9AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **NEPHROLOGY**

**PATEL, AMAR**  
Provider ID: 245639  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 340 4TH AVE STE 4  
CHULA VISTA, CA 91910  
☎ Phone: (619) 427-1144  
Fax: (619) 427-1185  
🕒 After Hours Phone: (619)

427-1144  
Provider Gender: Male  
NPI: 1821359605  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Gujarati, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 9AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **NEPHROLOGY**

**PHAM, JENNIFER**  
Provider ID: 302863  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 340 FOURTH AVE STE 4  
CHULA VISTA, CA 91910  
☎ Phone: (619) 427-1144  
Fax: (619) 427-1185  
🕒 After Hours Phone: (619)  
427-1144  
Provider Gender: Female  
NPI: 1235629932  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 9AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **NEPHROLOGY**

**VIDEEN, JOHN**  
Provider ID: 262286  
Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD  
📍 752 MEDICAL CENTER CT  
STE 302  
CHULA VISTA, CA 91911  
☎ Phone: (619) 421-3361  
Fax: (619) 869-4378  
🕒 After Hours Phone: (619)  
421-3361  
Provider Gender: Male  
NPI: 1043318199  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

AND HEALTHCARE CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

AND HEALTHCARE CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### NEPHROLOGY

#### VIDEEN, JOHN

Provider ID: 290110  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 752 MEDICAL CENTER CT  
STE 302  
CHULA VISTA, CA 91911  
 Phone: (619) 421-3361  
Fax: (619) 869-4378  
 After Hours Phone: (619)  
421-3361  
Provider Gender: Male  
NPI: 1043318199  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP CORONADO HOSP

### NEPHROLOGY

#### VIDEEN, JOHN

Provider ID: 65646  
Board Certified Specialty: No  
BALBOA NEPHROLOGY MED  
GRP INC  
 752 MEDICAL CENTER CT  
STE 302  
CHULA VISTA, CA 91911  
 Phone: (619) 421-3361  
Fax: (619) 869-4378  
 After Hours Phone: (619)  
421-3361  
Provider Gender: Male  
NPI: 1043318199  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP CORONADO HOSP




### NEPHROLOGY

#### YUAN, HENRY

Provider ID: 268551  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 340 4TH AVE STE 4  
CHULA VISTA, CA 91910  
 Phone: (619) 427-1144  
Fax: (619) 427-1185  
 After Hours Phone: (619)  
427-1144  
Provider Gender: Male  
NPI: 1043442379  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, PARADISE  
VALLEY HOSPITAL, Providence  
St Joseph Hospital, Providence  
St Jude Medical Center,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

SOUTH COAST GLOBAL  
MEDICAL CENTER INC,  
ENCOMPASS HEALTH  
REHABILITATION HOSPITAL  
OF TUSTIN, Foothill Regional  
Medical Center, Foothill  
Regional Medical Center,  
KINDRED HOSPITAL BREA,  
KINDRED HOSPITAL LA  
MIRADA, KINDRED HOSPITAL  
SANTA ANA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC

### NEUROLOGY






#### GUPTA, MONIKA




Provider ID: 307937  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 450 4TH AVE STE 215  
CHULA VISTA, CA 91910  
 Phone: (619) 425-3840  
 Fax: (833) 941-2595  
 After Hours Phone: (619)  
425-3840  
 Provider Gender: Female  
 NPI: 1922243401  
 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Hindi, Spanish  
Cultural Competency: N  
Hospital Affiliation: TEMECULA  
VALLEY HOSPITAL INC, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### NEUROLOGY







#### HOSSEIN ZADEH MALEKI, ANA

Provider ID: 304999  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 450 FOURTH AVE STE 215  
CHULA VISTA, CA 91910  
 Phone: (619) 425-3840  
 Fax: (619) 485-5440  
 After Hours Phone: (619)  
425-3840  
 Provider Gender: Female  
 NPI: 1316471485  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Persian  
Cultural Competency: N  
Hospital Affiliation: TEMECULA  
VALLEY HOSPITAL INC  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### NEUROLOGY



#### MAREK, MAKSYM

Provider ID: 306707  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 450 FOURTH AVE STE 215  
CHULA VISTA, CA 91910  
 Phone: (619) 425-3840  
 Fax: (619) 425-3842  
 After Hours Phone: (619)  
425-3840  
 Provider Gender: Male  
 NPI: 1881182079  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi, Spanish,  
Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。











## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### NEUROLOGY








#### MOHAMMAD, AHMAD

Provider ID: 127244  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 750 MEDICAL CENTER CT  
STE 6  
CHULA VISTA, CA 91911  
 Phone: (619) 337-7900  
Fax: (619) 337-7902  
 After Hours Phone: (619)  
337-7900  
Provider Gender: Male  
NPI: 1902973472  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Farsi,  
French, German, Pashto,  
Persian, Spanish  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MERCY HOSPITAL, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: Community Care IPA LLC









### NEUROLOGY

#### SORIA LOPEZ, JOSE

Provider ID: 295744  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 450 4TH AVE STE 215  
CHULA VISTA, CA 91910  
 Phone: (619) 425-3840  
Fax: (619) 485-5440  
 After Hours Phone: (619)  
425-3840  
Provider Gender: Male  
NPI: 1225474034  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
TEMECULA VALLEY HOSPITAL  
INC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-6PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### OBSTETRICS / GYNECOLOGY

#### ATIGA, SCHUBERT

Provider ID: 268953  
Board Certified Specialty: Yes  
COMMUNITY CARE IPA LLC  
 752 MEDICAL CENTER CT  
STE 106  
CHULA VISTA, CA 91911  
 Phone: (619) 482-8406  
Fax: (619) 482-6656  
 After Hours Phone: (619)  
482-8406  
Provider Gender: Male  
NPI: 1033138714  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-5PM  
F 8AM-0PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OBSTETRICS / GYNECOLOGY

#### ATIGA, SCHUBERT

Provider ID: 290331  
Board Certified Specialty: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### IHP OF SOUTHERN CAL-PHP

752 MEDICAL CENTER CT  
STE 106

CHULA VISTA, CA 91911

Phone: (619) 482-8406

Fax: (619) 482-6656

After Hours Phone: (619)  
482-8406

Provider Gender: Male

NPI: 1033138714

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-5PM  
F 8AM-OPM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### OCCUPATIONAL THERAPIST

#### MORRIS, SHEILA

Provider ID: 268926

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1020 TIERRA DEL REY STE  
A-1

CHULA VISTA, CA 91910

Phone: (619) 585-7104

Fax: (619) 585-7106

After Hours Phone: (619)  
585-7104

Provider Gender: Female

NPI: 1689039877

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 7AM-6PM  
SA 7AM-2PM

Website: N/A

IPA: Community Care IPA LLC

### OPHTHALMOLOGY

#### HO, AMIEE

Provider ID: 297633

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1396009478

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### OPTOMETRIST

#### CHAIN, PEI CHI

Provider ID: 297621

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-2025

After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1730676727

Provider English Spoken: Y

Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### OPTOMETRIST



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **KOO, ANITA**

Provider ID: 304830

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

Provider Gender: Female  
NPI: 1669825667

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A



IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

### **KOO, ANITA**


Provider ID: 304537

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 835 THIRD AVESTE A  
CHULA VISTA, CA 91911  
 Phone: (619) 425-7755  
Fax: (619) 425-2138

 After Hours Phone: (619)  
425-7755

Provider Gender: Female  
NPI: 1669825667

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A



IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

### **KOO, ANITA**

Provider ID: 306902

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 835 THIRD AVESTE A  
CHULA VISTA, CA 91911  
 Phone: (619) 425-7755  
Fax: (619) 425-2138

 After Hours Phone: (619)  
425-7755


Provider Gender: Female  
NPI: 1669825667


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A



IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

### **MASCARENO, EFRAIN**

Provider ID: 268680

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 440 4TH AVE STE 9  
CHULA VISTA, CA 91910  
 Phone: (619) 427-2020  
Fax: (866) 254-5707

 After Hours Phone: (619)  
427-2020


Provider Gender: Male  
NPI: 1457507279

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: No  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-6PM

 Website: N/A



IPA: Community Care IPA LLC,  
Imperial Health Holdings  
Medical Group-SD

### **OPTOMETRIST**

### **MASCARENO, EFRAIN**

Provider ID: 262229

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

 440 4TH AVE STE 9  
CHULA VISTA, CA 91910  
 Phone: (619) 427-2020

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (866) 254-5707

☎ After Hours Phone: (619) 427-2020

Provider Gender: Male

NPI: 1457507279

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

Imperial Health Holdings

Medical Group-SD

### **OPTOMETRIST**

#### **MASCARENO, EFRAIN**

Provider ID: 268679

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 2260 OTAY LAKES RD STE  
111

CHULA VISTA, CA 91915

☎ Phone: (619) 421-5550

Fax: (866) 254-5707

☎ After Hours Phone: (619)  
421-5550

Provider Gender: Male

NPI: 1457507279

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\None

American Sign Language (ASL): Medical Group-SD

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

Imperial Health Holdings

Medical Group-SD

### **OPTOMETRIST**

#### **MASCARENO, EFRAIN**

Provider ID: 262228

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

📍 2260 OTAY LAKES RD STE  
111

CHULA VISTA, CA 91915

☎ Phone: (619) 421-5550

Fax: (866) 254-5707

☎ After Hours Phone: (619)  
421-5550

Provider Gender: Male

NPI: 1457507279

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

Imperial Health Holdings

### **OPTOMETRIST**

#### **NGUYEN, THU**

Provider ID: 125032

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

📍 342 F ST

CHULA VISTA, CA 91910

☎ Phone: (619) 422-1471

Fax: (619) 422-0450

☎ After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1326323627

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish, Tagalog,  
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

### **OPTOMETRIST**

#### **NGUYEN, THU**

Provider ID: 298022

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 422-0450

After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish, Tagalog,  
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### OPTOMETRIST

**NGUYEN, THU**

Provider ID: 265518

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 422-0450

After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish, Tagalog,  
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### OPTOMETRIST

**RICHARDSON, JULIA**

Provider ID: 297645

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 422-2025

After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1770154528

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### OPTOMETRIST

**SCOVILL, ALEXANDRA**

Provider ID: 297625

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 240-3764

After Hours Phone: (619)  
422-1471

Provider Gender: Female

NPI: 1184146094

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### OPTOMETRIST

**TRAN, JESSICA**

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## D. 专家名录

Provider ID: 304888

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

340 FOURTH AVESTE 19  
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)  
761-5308

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OTOLARYNGOLOGY

#### **MCCALLION, PATRICK**

Provider ID: 290541

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

765 MEDICAL CENTER CT  
STE 210

CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)  
482-0565

Provider Gender: Male

NPI: 1134144454

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

### OTOLARYNGOLOGY

#### **SAEZ, NEIL**

Provider ID: 302432

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

765 MEDICAL CENTER CT  
STE 210

CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)  
482-0565

Provider Gender: Male

NPI: 1518456508

Provider English Spoken: Y  
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **AGHILI, ROXANA**

Provider ID: 303782

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

386 E H ST STE 202  
CHULA VISTA, CA 91910

Phone: (858) 966-1720

Fax: (858) 966-1725

After Hours Phone: (858)  
966-1720

Provider Gender: Female

NPI: 1851927883

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER  
FOUNDATION HOSPITAL SAN

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

*DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*

*SA 1PM-10PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*


### **PEDIATRIC EMERGENCY MEDICINE**

**BETTY, MARYANN RIVA**

*Provider ID: 245751*

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 *386 E H ST STE 202 CHULA VISTA, CA 91910*

 *Phone: (858) 966-1720*

*Fax: (858) 966-1725*

 *After Hours Phone: (858) 966-1720*

*Provider Gender: Female*

*NPI: 1285014498*

 *Provider English Spoken: Y Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): IPA: Rady Childrens Health Network*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*

*SA 1PM-10PM*

 *Website: N/A*


*IPA: Rady Childrens Health Network*


### **PEDIATRIC EMERGENCY MEDICINE**

**DEVERA, GEMMIE**

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 *386 E H ST STE 202 CHULA VISTA, CA 91910*

 *Phone: (858) 966-1720*

 *After Hours Phone: (858) 966-1720*

*Provider Gender: Female*

*NPI: 1366622078*

 *Provider English Spoken: Y Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


### **PEDIATRIC EMERGENCY MEDICINE**

**GORHAM, LAURA**

*Provider ID: 275787*

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 *386 E H ST STE 202 CHULA VISTA, CA 91910*

 *Phone: (858) 966-1720*

*Fax: (858) 966-1725*

 *After Hours Phone: (858) 966-1720*

*Provider Gender: Female*

*NPI: 1316162324*

 *Provider English Spoken: Y Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*

*SA 1PM-10PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

### **PEDIATRIC EMERGENCY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<b>MEDICINE</b>		
<b>GROSS, MATTHEW</b> Provider ID: 297176 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 386 E H ST STE 202 CHULA VISTA, CA 91910 Phone: (858) 966-1720 Fax: (858) 966-1725 After Hours Phone: (858) 966-1720 Provider Gender: Male NPI: 1942223664 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network	<b>RADY CHILDRENS HEALTH NETWORK</b> 386 E H ST STE 202 CHULA VISTA, CA 91910 Phone: (858) 966-1720 Fax: (858) 966-1725 After Hours Phone: (858) 966-1720 Provider Gender: Female NPI: 1134681265 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network	Phone: (858) 966-1720 Fax: (858) 966-1725 After Hours Phone: (858) 966-1720 Provider Gender: Female NPI: 1689646689 Provider English Spoken: Y Provider Language(s) Spoken: French Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network
<b>PEDIATRIC EMERGENCY MEDICINE</b>		
<b>MENDES, CHANTAL</b> Provider ID: 295669 Board Certified Specialty: No	<b>PEDIATRIC EMERGENCY MEDICINE</b> <b>MINKA, GENEVIEVE</b> Provider ID: 289468 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 386 E H ST STE 202 CHULA VISTA, CA 91910	
<b>PEDIATRIC EMERGENCY MEDICINE</b>		
<b>OZAKI, YOSHIHIRO</b> Provider ID: 241923 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 386 E H ST STE 202 CHULA VISTA, CA 91910 Phone: (858) 966-1720		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Fax: (858) 966-1725

☎ After Hours Phone: (858) 966-1720

Provider Gender: Male

NPI: 1467898239

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **VAIDYA, KAMALA**

Provider ID: 289411

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 386 E H ST STE 202  
CHULA VISTA, CA 91910

☎ Phone: (858) 966-1720

Fax: (858) 966-1725

☎ After Hours Phone: (858) 966-1720

Provider Gender: Female

NPI: 1083840920

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRICS

#### **ROWHANI, NAGHMEH**

Provider ID: 306065

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 280 E ST  
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 426-2170

☎ After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1992876759

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICAL MEDICINE / REHABILITATION

#### **RICHARDSON, HENRY**

Provider ID: 295275

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 340 4TH AVE STE 19  
CHULA VISTA, CA 91910

☎ Phone: (760) 607-5350

Fax: (760) 607-5365

☎ After Hours Phone: (760) 607-5350

Provider Gender: Male

NPI: 1407052459

☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

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## D. 专家名录

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **GI, HUNG**

Provider ID: 302126

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

280 E ST  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
Fax: (619) 662-4196

After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1023207404

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Chinese, French,  
Spanish

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PHYSICIANS ASSISTANT**

#### **GUTH, CARA**

Provider ID: 299110

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

480 4TH AVE STE 501  
CHULA VISTA, CA 91910

Phone: (619) 425-9510

Fax: (619) 425-0539

After Hours Phone: (619)  
425-9510

Provider Gender: Female

NPI: 1992177182

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **INDA, PRISCILLA**

Provider ID: 265072

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

450 4TH AVE STE 215  
CHULA VISTA, CA 91910

Phone: (619) 434-0204

Fax: (619) 337-0191

After Hours Phone: (619)  
434-0204

Provider Gender: Female

NPI: 1679008379

Provider English Spoken: Y  
Provider Language(s)

Spoken: Arabic, Russian,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **PHYSICIANS ASSISTANT**

#### **VARGAS, CHRISTOPHER**

Provider ID: 268744

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2452 FENTON ST STE C203  
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)  
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

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## D. 专家名录



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

### **PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**  
*Provider ID: 295945*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 2452 FENTON ST STE C101  
CHULA VISTA, CA 91914  
 *Phone: (619) 600-5309*  
*Fax: (619) 655-4700*  
 *After Hours Phone: (619) 600-5309*


*Provider Gender: Male*  
*NPI: 1922505775*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*



### **PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**  
*Provider ID: 295828*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 2452 FENTON ST STE C203  
CHULA VISTA, CA 91914  
 *Phone: (619) 600-5309*  
*Fax: (619) 655-4700*

 *After Hours Phone: (619) 600-5309*

*Provider Gender: Male*  
*NPI: 1922505775*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*


 *Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

### **PHYSICIANS ASSISTANT**

**WRIGHT, DEREK**  
*Provider ID: 302389*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 340 FOURTH AVESTE 19  
CHULA VISTA, CA 91910

 *Phone: (619) 761-5308*  
*Fax: (619) 591-1910*

 *After Hours Phone: (619) 761-5308*

*Provider Gender: Male*  
*NPI: 1629674858*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*


 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### **PODIATRIST**

**BRAZIER, SETH**  
*Provider ID: 306399*  
*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 855 THIRD AVESTE 1100  
CHULA VISTA, CA 91911

 *Phone: (619) 631-4033*  
*Fax: (619) 880-5057*

 *After Hours Phone: (619) 631-4033*

*Provider Gender: Male*  
*NPI: 1033554324*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

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## D. 专家名录

Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PODIATRIST

#### CAINE, SAMUEL


Provider ID: 308211

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 345 F ST STE 100  
CHULA VISTA, CA 91910

 Phone: (619) 727-3481

Fax: (619) 420-7087

 After Hours Phone: (619)  
727-3481

Provider Gender: Male

NPI: 1396230298

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY


HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SHARP CHULA  
VISTA MED CTR, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### PODIATRIST

#### DAVIDSON III, JOHN


Provider ID: 129545

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 345 F ST STE 100  
CHULA VISTA, CA 91910



 Phone: (619) 427-3481

Fax: (619) 420-7807

 After Hours Phone: (619)  
427-3481

Provider Gender: Male

NPI: 1689069874

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SHARP CHULA VISTA  
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC


### PODIATRIST

#### READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 855 3RD AVE STE 1100  
CHULA VISTA, CA 91911



 Phone: (619) 631-4033

Fax: (619) 880-5057

 After Hours Phone: (619)  
631-4033

Provider Gender: Male

NPI: 1952963431

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

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## D. 专家名录

Rady Childrens Health  
Network

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### PSYCHOLOGIST

---

#### BAYLON, ALDO

Provider ID: 290243

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1649429150

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-8PM  
SA 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### PSYCHOLOGIST

---

#### CELAYA, PATRICIA

Provider ID: 294875

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1952656902

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-8PM  
SA 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### PSYCHOLOGIST

---

#### GALLO, LINDA

Provider ID: 296782

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

780 BAY BLVD STE 200  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7852

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1427773621

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### PSYCHOLOGIST

---

#### GOULD, HILARY

Provider ID: 290467

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 271-0260

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1104297696

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### PSYCHOLOGIST

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#### WIJAYARATNE, IMANIE

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## D. 专家名录

Provider ID: 290092  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
Fax: (619) 271-0260  
After Hours Phone: (619)  
662-4100  
Provider Gender: Male  
NPI: 1932358355  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **RADIATION ONCOLOGY**

**CARMONA, RUBEN**  
Provider ID: 303101  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
769 MEDICAL CENTER CT  
CHULA VISTA, CA 91911  
Phone: (858) 939-5010  
Fax: (619) 740-8499  
After Hours Phone: (858)  
939-5010  
Provider Gender: Male  
NPI: 1275929242  
Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp  
Grossmont Hospital, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

**COLEMAN, LORI**  
Provider ID: 206393  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
769 MEDICAL CENTER CT  
CHULA VISTA, CA 91911  
Phone: (619) 502-5851  
Fax: (619) 502-5865  
After Hours Phone: (619)  
502-5851  
Provider Gender: Female  
NPI: 1053348920  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
PALOMAR MEDICAL CENTER,




Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 19\100  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

**VOLPP, PAUL**  
Provider ID: 221102  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
769 MEDICAL CENTER CT  
CHULA VISTA, CA 91911  
Phone: (619) 502-5851  
Fax: (619) 502-5865  
After Hours Phone: (619)  
502-5851  
Provider Gender: Male  
NPI: 1225186232  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
GROSSMONT HOSPITAL,  
PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 19\100  
American Sign Language (ASL):  
N


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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

### RADIATION ONCOLOGY




#### **WEINSTEIN, GEOFFREY**


*Provider ID: 200538*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 769 MEDICAL CENTER CT  
CHULA VISTA, CA 91911  
 *Phone: (619) 502-5851*  
*Fax: (619) 502-5865*  
 *After Hours Phone: (619) 502-5851*  
*Provider Gender: Male*  
*NPI: 1841233947*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
*GROSSMONT HOSPITAL,*  
*SHARP MEMORIAL HOSPITAL,*  
*SHARP CHULA VISTA MED CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 19\100*  
*American Sign Language (ASL):*  
*N*



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

### REGISTERED PHYSICAL THERAPIST

#### **CHENG, BRANDON**

*Provider ID: 304529*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1392 E PALOMAR ST STE 503  
CHULA VISTA, CA 91913  
 *Phone: (619) 482-3000*  
*Fax: (619) 482-3001*  
 *After Hours Phone: (619) 482-3000*


*Provider Gender: Male*  
*NPI: 1336894724*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 7AM-7PM F 7AM-5PM SA 8AM-1PM*  
 *Website: N/A*




*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*

### REGISTERED PHYSICAL THERAPIST

#### **CHENG, BRANDON**




*Provider ID: 307786*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 1392 E PALOMAR ST STE

503  
CHULA VISTA, CA 91913  
 *Phone: (619) 482-3000*  
*Fax: (619) 482-3001*  
 *After Hours Phone: (619) 482-3000*  
*Provider Gender: Male*  
*NPI: 1336894724*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 7AM-7PM F 7AM-5PM SA 8AM-1PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*



### REGISTERED PHYSICAL THERAPIST




#### **JAIN, ALEXANDRA**

*Provider ID: 305150*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 880 THIRD AVE STE A  
CHULA VISTA, CA 91911  
 *Phone: (619) 205-4585*  
*Fax: (619) 271-3183*  
 *After Hours Phone: (619) 205-4585*  
*Provider Gender: Female*  
*NPI: 1063170603*

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## D. 专家名录



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 55\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **JIMENEZ, ANDREA**

Provider ID: 299889  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000  
Fax: (619) 482-3001  
 After Hours Phone: (619)  
482-3000  
Provider Gender: Female  
NPI: 1407440670


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 7AM-7PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **KARANDE, PRACHI**




Provider ID: 287100  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000  
Fax: (619) 482-3001  
 After Hours Phone: (619)  
482-3000  
Provider Gender: Female  
NPI: 1699357525


 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP



### REGISTERED PHYSICAL THERAPIST

#### **KARANDE, PRACHI**

Provider ID: 301380  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000  
Fax: (619) 482-3001  
 After Hours Phone: (619)  
482-3000  
Provider Gender: Female  
NPI: 1699357525



 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **NGUYEN, TIA**

Provider ID: 305014  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000  
Fax: (619) 482-3001

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ *After Hours Phone: (619) 482-3000*

*Provider Gender: Female*

*NPI: 1457136269*

🗨 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH 7AM-7PM  
F 7AM-4PM*

🌐 *Website: N/A*

*IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP*

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **NGUYEN, TIA**

*Provider ID: 305013*

*Board Certified Specialty: No  
COMMUNITY CARE IPA LLC*

📍 1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

☎ *Phone: (619) 482-3000*

*Fax: (619) 482-3001*

☎ *After Hours Phone: (619)  
482-3000*

*Provider Gender: Female*

*NPI: 1457136269*

🗨 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH 7AM-7PM  
F 7AM-4PM*

🌐 *Website: N/A*

*IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP*

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **NOVENCIDO, ANDREW**

*Provider ID: 301994*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

📍 1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

☎ *Phone: (619) 482-3000*

*Fax: (619) 482-3001*

☎ *After Hours Phone: (619)  
482-3000*

*Provider Gender: Male*

*NPI: 1447723937*

🗨 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP*

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **NOVENCIDO, ANDREW**

*Provider ID: 286782*

*Board Certified Specialty: No  
COMMUNITY CARE IPA LLC*

📍 1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

☎ *Phone: (619) 482-3000*

*Fax: (619) 482-3001*

☎ *After Hours Phone: (619)  
482-3000*

*Provider Gender: Male*

*NPI: 1447723937*

🗨 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP*

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **SPARKS, TODD**

*Provider ID: 129142*

*Board Certified Specialty: No  
COMMUNITY CARE IPA LLC*

📍 1392 E PALOMAR ST STE  
503

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## D. 专家名录

CHULA VISTA, CA 91913  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619) 482-3000  
Provider Gender: Male  
NPI: 1265481139  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M 7AM-7PM  
TU 7AM-0PM  
W-TH 7AM-7PM  
F 7AM-0PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**  
Provider ID: 301108  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619)  
482-3000

Provider Gender: Male  
NPI: 1265481139  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M 7AM-7PM  
TU 7AM-0PM  
W-TH 7AM-7PM  
F 7AM-0PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**  
Provider ID: 301418  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619)  
482-3000  
Provider Gender: Male  
NPI: 1760194302  
☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**  
Provider ID: 305424  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619)  
482-3000  
Provider Gender: Male  
NPI: 1760194302  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**

Provider ID: 301532

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **RHEUMATOLOGY**

**CHITKARA, PUJA**

Provider ID: 262358

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

765 MEDICAL CENTER CT  
STE 216

CHULA VISTA, CA 91911

Phone: (619) 623-3000

Fax: (619) 623-3001

After Hours Phone: (619)  
623-3000

Provider Gender: Female

NPI: 1871718189

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Russian,  
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4:30PM

Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

### **RHEUMATOLOGY**

**CHWA, JEFFREY**

Provider ID: 268780

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

765 MEDICAL CENTER CT  
STE 216

CHULA VISTA, CA 91911

Phone: (619) 623-3000

Fax: (619) 623-3001

After Hours Phone: (619)  
623-3000

Provider Gender: Male

NPI: 1285989236

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **SPEECH PATHOLOGIST**

**AROCHO-SALGADO, MIRELIS**

Provider ID: 296928

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

333 H ST STE 5000

CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1063660165

Provider English Spoken: Y  
Cultural Competency: N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**


**CLARK, MELISSA**

Provider ID: 296923

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 333 H ST STE 5000  
CHULA VISTA, CA 91910


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 7AM-7PM  
M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **SPEECH PATHOLOGIST**

**DURNAN, CASSANDRA**

Provider ID: 307884

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 333 H ST STE 5000  
CHULA VISTA, CA 91910


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **SPEECH PATHOLOGIST**

**O'DORAN, KAYLA**

Provider ID: 296587

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 333 H ST STE 5000  
CHULA VISTA, CA 91910

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1275021438

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**

Provider ID: 304607

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1111 BROADWAY STE 305  
CHULA VISTA, CA 91911

 Phone: (619) 576-7007

Fax: (619) 567-7775

 After Hours Phone: (619)  
576-7007

Provider Gender: Male

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N




Hospital Affiliation: PALOMAR

HEALTH, PARADISE VALLEY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
SCRIPPS MERCY HOSPITAL,  
PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


### **SURGERY ORTHOPEDIC**

#### **ANDRY, JAMES**

Provider ID: 302084

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 750 MEDICAL CENTER CT  
STE 14  
CHULA VISTA, CA 91911

 Phone: (858) 824-1703  
Fax: (858) 455-6473

 After Hours Phone: (858)  
824-1703

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS MERCY  
HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, Sharp  
Grossmont Hospital, SHARP  
MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: IHP of Southern Cal-PHP


### **SURGERY ORTHOPEDIC**

#### **KUSNEZOV, NICHOLAS**

Provider ID: 303195

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 750 MEDICAL CENTER CT  
STE 14  
CHULA VISTA, CA 91911

 Phone: (858) 824-1703  
Fax: (858) 455-6473

 After Hours Phone: (858)  
824-1703

Provider Gender: Male

NPI: 1396185161

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TWIN  
CITIES COMMUNITY  
HOSPITAL, TRI CITY MEDICAL  
CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SHARP CHULA  
VISTA MED CTR, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, Sharp  
Grossmont Hospital, Sharp  
Grossmont Hospital, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **CMP PENDLETON**



#### **CERTIFIED NURSE PRACTITIONER**

#### **FREEMAN, WANDA**

Provider ID: 298117

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 619 CROUCH ST  
CMP PENDLETON, CA  
92054

 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1659504264

 Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: IHP of Southern Cal-PHP


### CERTIFIED NURSE PRACTITIONER

#### **HARRIS, PAMELA**

Provider ID: 302288

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
CMP PENDLETON, CA  
92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

## **CORONADO**

### CERTIFIED NURSE PRACTITIONER


#### **LANE, KIMBERLY**

Provider ID: 301599


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 230 PROSPECT PL STE 210  
CORONADO, CA 92118

 Phone: (619) 299-0670

Fax: (858) 429-7929

 After Hours Phone: (619)  
299-0670

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### HEARING AID DEALER / SUPPLIER

#### **DAVIS, KELLE**


Provider ID: 268655

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 801 ORANGE AVE  
CORONADO, CA 92118


 Phone: (619) 437-8154

Fax: (310) 989-3092

 After Hours Phone: (619)  
437-8154

Provider Gender: Female

NPI: 1902853344

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### SURGERY ORTHOPEDIC

#### **ANDRY, JAMES**


Provider ID: 302087

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 230 PROSPECT PL STE 230  
CORONADO, CA 92118

 Phone: (619) 435-7282

Fax: (619) 435-3723

 After Hours Phone: (619)  
435-7282

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

ENCINITAS, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-F 8AM-5PM  
 🌐 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **SURGERY ORTHOPEDIC**

**PALLIA, CHRISTOPHER**  
 Provider ID: 302102  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 📍 230 PROSPECT PL STE 230 CORONADO, CA 92118  
 📞 Phone: (619) 435-7282  
 📠 Fax: (619) 435-3723  
 📞 After Hours Phone: (619) 435-7282  
 Provider Gender: Male  
 NPI: 1497751457  
 📄 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SHARP CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-F 8AM-5PM  
 🌐 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **EL CAJON**

### **CARDIOVASCULAR DISEASE**

**LERNER, JONATHAN**  
 Provider ID: 303446  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 📍 1625 E MAIN ST STE 201 EL CAJON, CA 92021  
 📞 Phone: (619) 486-6512  
 📠 Fax: (619) 616-2104  
 📞 After Hours Phone: (619) 486-6512  
 Provider Gender: Male  
 NPI: 1962899823  
 📄 Provider English Spoken: Y  
 📄 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP CHULA VISTA MED CTR  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-F 8AM-5PM  
 🌐 Website: N/A  
 IPA: Community Care IPA LLC

### **CERTIFIED ACUPUNCTURIST**

**CRAFT, KEVIN**  
 Provider ID: 290945  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 📍 855 E MADISON AVE EL CAJON, CA 92020  
 📞 Phone: (619) 440-2751  
 📠 Fax: (360) 462-2746

📞 After Hours Phone: (619) 440-2751

Provider Gender: Male  
 NPI: 1659745610

📄 Provider English Spoken: Y  
 📄 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: TU-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **LOPEZ, MARIA**

Provider ID: 307856

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

855 E MADISON AVE  
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)  
440-2751

Provider Gender: Female

NPI: 1790075711

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE** **PRACTITIONER**

### **BRANNEN, MANDY**

Provider ID: 241600

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

215 W MADISON AVE  
EL CAJON, CA 92020

Phone: (619) 667-6125

Fax: (619) 590-9036

After Hours Phone: (619)

667-6125

Provider Gender: Female

NPI: 1891205159

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 4PM-7PM

W 4PM-7PM

F 4PM-7PM

Website: N/A

IPA: Community Care IPA LLC

### **CERTIFIED NURSE** **PRACTITIONER**

### **CHUDACEK, JANET**

Provider ID: 241626

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

215 W MADISON AVE  
EL CAJON, CA 92020

Phone: (760) 737-6960

Fax: (760) 741-2782

After Hours Phone: (760)  
737-6960

Provider Gender: Female

NPI: 1932606118

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 4PM-7PM

W 4PM-7PM

F 4PM-7PM

Website: N/A

IPA: Community Care IPA LLC

### **CERTIFIED NURSE** **PRACTITIONER**

### **HAMID, WAHIDA**

Provider ID: 302295

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1164812293

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE** **PRACTITIONER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### MANRIQUEZ, LISETTE

Provider ID: 307102

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100  
Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Female  
NPI: 1760058911

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### ORPILLA, IMELDA

Provider ID: 306861

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

855 E MADISON AVE  
EL CAJON, CA 92020

Phone: (833) 867-4642  
Fax: (360) 462-2749

After Hours Phone: (833)  
867-4642

Provider Gender: Female  
NPI: 1790785988

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### ORPILLA, IMELDA

Provider ID: 307131

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

855 E MADISON AVE  
EL CAJON, CA 92020

Phone: (833) 867-4642  
Fax: (360) 462-2749

After Hours Phone: (833)  
867-4642

Provider Gender: Female  
NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### PIRTLE, KEYSHONE

Provider ID: 284244

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

5442 SYCUAN RD  
EL CAJON, CA 92019

Phone: (619) 445-0707  
Fax: (619) 445-9764

After Hours Phone: (619)  
445-0707

Provider Gender: Male  
NPI: 1417567827

































Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-4PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Community Care IPA LLC</i></p> <hr/> <p><b><u>CERTIFIED NURSE PRACTITIONER</u></b></p> <hr/> <p><b>WILLIAMS, SHANTRICE</b></p> <p><i>Provider ID: 296007</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 855 E MADISON AVE EL CAJON, CA 92020</p> <p> <i>Phone: (619) 440-2751</i></p> <p><i>Fax: (360) 462-2746</i></p> <p> <i>After Hours Phone: (619) 440-2751</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1578865549</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M 8AM-2PM TU-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: IHP of Southern Cal-PHP</i></p> <hr/> <p><b><u>CHIROPRACTOR</u></b></p> <hr/> <p><b>MCCOWN, BARRY</b></p>	<p><i>Provider ID: 303815</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>COMMUNITY CARE IPA LLC</i></p> <p> 855 E MADISON AVE EL CAJON, CA 92020</p> <p> <i>Phone: (619) 440-2751</i></p> <p><i>Fax: (360) 462-2746</i></p> <p> <i>After Hours Phone: (619) 440-2751</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1487781035</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</i></p> <hr/> <p><b><u>CHIROPRACTOR</u></b></p> <hr/> <p><b>MCCOWN, BARRY</b></p> <p><i>Provider ID: 303849</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 470 N MOLLISON AVE EL CAJON, CA 92021</p> <p> <i>Phone: (833) 867-4642</i></p> <p><i>Fax: (360) 462-5840</i></p> <p> <i>After Hours Phone: (833) 867-4642</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1487781035</i></p>	<p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</i></p> <hr/> <p><b><u>CHIROPRACTOR</u></b></p> <hr/> <p><b>MCCOWN, BARRY</b></p> <p><i>Provider ID: 301343</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 855 E MADISON AVE EL CAJON, CA 92020</p> <p> <i>Phone: (619) 440-2751</i></p> <p><i>Fax: (360) 462-2746</i></p> <p> <i>After Hours Phone: (619) 440-2751</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1487781035</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Community Care IPA LLC,</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IHP of Southern Cal-PHP

### **DERMATOLOGY**

#### **LIN, SHINKO**

Provider ID: 306321

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

222 W MADISON AVE  
EL CAJON, CA 92020

Phone: (619) 579-5115

Fax: (619) 749-6174

After Hours Phone: (619)  
579-5115

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **DERMATOLOGY**

#### **LIN, SHINKO**

Provider ID: 308218

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

222 W MADISON AVE  
EL CAJON, CA 92020

Phone: (619) 579-5115

Fax: (619) 749-6174

After Hours Phone: (619)  
579-5115

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **RONQUILLO, KAREN AN**

Provider ID: 304781

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

855 E MADISON AVE  
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)

440-2751

Provider Gender: Female

NPI: 1275160012

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **GASTROENTEROLOGY**

#### **NOVO, MEGAN**

Provider ID: 296067

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2732 NAVAJO RD STE 200  
EL CAJON, CA 92020

Phone: (619) 266-3332

Fax: (619) 266-6000

After Hours Phone: (619)  
266-3332

Provider Gender: Female

NPI: 1770961971

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD LA JOLLA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

JOHN SALLY THORNTON,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, UNIVERSITY OF  
CALIFORNIA IRVINE MED CTR,  
UCSD MEDICAL CTR, UCSD  
MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### HEARING AID DEALER / SUPPLIER


---

**ANDERSON, ELAINE**

Provider ID: 268692

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1767 E MAIN ST  
EL CAJON, CA 92021

 Phone: (619) 440-6516

Fax: (619) 440-6547

 After Hours Phone: (619)  
440-6516

Provider Gender: Female

NPI: 1063558856

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### HEARING AID DEALER / SUPPLIER


---

**DAVIS, KELLE**

Provider ID: 268650

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1767 E MAIN ST  
EL CAJON, CA 92021

 Phone: (619) 440-6516

Fax: (619) 440-6547

 After Hours Phone: (619)  
440-6516

Provider Gender: Female

NPI: 1902853344


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### INTERNAL MEDICINE

---


**AWDISHO, ALAN**

Provider ID: 291282

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1164795498

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Assyrian, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### INTERNAL MEDICINE


---

**MAY, LOUIS**

Provider ID: 294916

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100


Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERNAL MEDICINE

#### **MICHAEL, RAMI**

Provider ID: 294908

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020


 Phone: (619) 662-4100


Fax: (619) 785-3356

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1467871673

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Chaldean  
Neo-Aramaic

Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY


#### **SHEREV, DIMITRI**

Provider ID: 302988

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC


 1380 EL CAJON BLVD  
EL CAJON, CA 92020


 Phone: (619) 867-0557

 After Hours Phone: (619)  
867-0557

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Bulgarian, Russian,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,

GROSSMONT HOSPITAL,  
ALVARADO COMMUNITY  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
ALVARADO HOSPITAL LLC,  
SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA  
MED CTR, TRI CITY MEDICAL

CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY

#### **SUDHAKAR, DEEPTHI**


Provider ID: 295843

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1625 E MAIN ST STE 201  
EL CAJON, CA 92021

 Phone: (619) 486-6512

Fax: (619) 616-2104

 After Hours Phone: (619)  
486-6512

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **OPTOMETRIST**

---


**AOTO, KIM**

Provider ID: 268721

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 450 FLETCHER PKWY STE  
112

EL CAJON, CA 92020

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)  
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **OPTOMETRIST**

---


**KOO, ANITA**

Provider ID: 306904

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 231 W MAIN ST

EL CAJON, CA 92020

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)  
425-7755

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **PHYSICIANS ASSISTANT**

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**INDA, PRISCILLA**

Provider ID: 265073


Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 328 HIGHLAND AVE STE  
200

EL CAJON, CA 92020

 Phone: (619) 930-9404


Fax: (619) 930-9426

 After Hours Phone: (619)  
930-9404

Provider Gender: Female

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Russian,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA  
VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### **PHYSICIANS ASSISTANT**


---

**LE, TAYLOR**

Provider ID: 304574

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 855 E MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)  
440-2751

Provider Gender: Female

NPI: 1396478400

 Provider English Spoken: Y

 Provider Language(s)

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## D. 专家名录


Spoken: Spanish  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PHYSICIANS ASSISTANT**

#### **RAMOS, JACQUELYN**

Provider ID: 301106

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 855 E MADISON AVE  
EL CAJON, CA 92020


 Phone: (619) 270-3600

Fax: (360) 462-2746

 After Hours Phone: (619)  
270-3600

Provider Gender: Female

NPI: 1003515131

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PHYSICIANS ASSISTANT**

#### **ROSENBLATT, SHERILYN**


Provider ID: 305449

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1114041621

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PSYCHOLOGIST**

#### **ARAIZA, ERNESTINA**

Provider ID: 290286

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020


 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1568608636

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PSYCHOLOGIST**

#### **CASEY, SHANNON**

Provider ID: 306785

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 215 W MADISON AVE  
EL CAJON, CA 92020

 Phone: (760) 737-6935

Fax: (760) 741-2782

 After Hours Phone: (760)  
737-6935

Provider Gender: Female

NPI: 1548873755

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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## D. 专家名录





 Hours: M-F 9AM-7PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### PSYCHOLOGIST

#### **CASEY, SHANNON**


Provider ID: 290309  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 215 W MADISON AVE  
EL CAJON, CA 92020  
 Phone: (760) 737-6935  
Fax: (760) 741-2782  
 After Hours Phone: (760)  
737-6935  
Provider Gender: Female  
NPI: 1548873755



 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-7PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP




---

### PSYCHOLOGIST

#### **GUARDADO-SOTO, RAQUEL**

Provider ID: 290342  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 855 E MADISON AVE




EL CAJON, CA 92020  
 Phone: (619) 440-2751  
Fax: (858) 633-4692  
 After Hours Phone: (619)  
440-2751


Provider Gender: Female  
NPI: 1194999276  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




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### PSYCHOLOGIST

#### **WHEELER, KIM**

Provider ID: 302144  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
Fax: (619) 785-3356  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1700577434




 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 11\None  
American Sign Language (ASL):  
N






 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### REGISTERED PHYSICAL THERAPIST

#### **CAMPA, PATRICIA**

Provider ID: 302398  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 860 JAMACHA RD STE 203  
EL CAJON, CA 92019  
 Phone: (619) 573-6373  
Fax: (619) 378-6578  
 After Hours Phone: (619)  
573-6373

Provider Gender: Female  
NPI: 1528079357  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### REGISTERED PHYSICAL THERAPIST

#### **MORRIS, CHAD**

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## D. 专家名录

Provider ID: 302403  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
860 JAMACHA RD STE 203  
EL CAJON, CA 92019  
Phone: (619) 573-6373  
Fax: (619) 378-6578  
After Hours Phone: (619)  
573-6373  
Provider Gender: Male  
NPI: 1841307063  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### EL CENTRO

#### ANESTHESIOLOGY

##### HYLTON, DIANA

Provider ID: 277248  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
1415 ROSS AVE  
EL CENTRO, CA 92243  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1932527751

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

#### ANESTHESIOLOGY

##### KRAUSE, MARTIN

Provider ID: 287653  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
1415 ROSS AVE  
EL CENTRO, CA 92243  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1417243239  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: German  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

#### ANESTHESIOLOGY

##### MINOKADEH, ANUSHIRVAN

Provider ID: 277351  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP  
1415 ROSS AVE  
EL CENTRO, CA 92243  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1053339093  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, TEMECULA  
VALLEY HOSPITAL INC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

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## D. 专家名录

---

American Sign Language (ASL): **PITTMAN, LILIANA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **ANESTHESIOLOGY CRITICAL CARE MEDICINE**

**RODRIGUEZ-MINETTE, JESSICA**

Provider ID: 277410

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1164809950

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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### **CERTIFIED NURSE PRACTITIONER**

Provider ID: 285963

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1326599002


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


**TABAREZ, NORMA**

Provider ID: 272979

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (866) 803-2262

 After Hours Phone: (866) 803-2262

Provider Gender: Female

NPI: 1538535570

---


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **EMERGENCY MEDICINE**

**BAGBY, JESSICA**

Provider ID: 271137

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



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## D. 专家名录




 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **GUITTARD, JESSE**

Provider ID: 239878  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (760) 339-7100  
 After Hours Phone: (760) 339-7100  
Provider Gender: Male  
NPI: 1770979890

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**



#### **HERNANDEZ, CRISTINA**

Provider ID: 242543  
Board Certified Specialty: No




#### UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1164765046

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N





 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **HORNBEAK, KIRSTEN**

Provider ID: 240024  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (760) 339-7100  
 After Hours Phone: (760) 339-7100  
Provider Gender: Female


NPI: 1205214442



 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **HUTCHISON, HEIDI**

Provider ID: 272661  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (760) 339-7100  
Fax: (760) 352-7612

 After Hours Phone: (760) 339-7100  
Provider Gender: Female  
NPI: 1417483587







 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SIERRA  
VISTA REGIONAL MED CTR,  
TWIN CITIES COMMUNITY

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## D. 专家名录









HOSPITAL, EL CENTRO  
REGIONAL MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

**ICHWAN, DANIEL**  
Provider ID: 283222  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1740711589  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**






**RUDOLF, FRANCES**  
Provider ID: 240161  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (760) 339-7000  
 After Hours Phone: (760)  
339-7000  
Provider Gender: Female  
NPI: 1821487430  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

**TANAKA, HIDEAKI**  
Provider ID: 239824  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 826-8273

 After Hours Phone: (800)  
826-8273  
Provider Gender: Male  
NPI: 1124280730  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER, Sharp Grossmont  
Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU 8AM-8PM  
M-F 8AM-5PM  
SA 8AM-8PM  
 Website: N/A  
IPA: UCSD Medical Group

### **INFECTIOUS DISEASE**

**AKRAMI, KEVAN**  
Provider ID: 277342  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1225364052  
 Provider English Spoken: Y  
 Provider Language(s)





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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录





*Spoken: Farsi, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
TEMECULA VALLEY HOSPITAL  
INC, UCSD MEDICAL CTR,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



### INFECTIOUS DISEASE

**SWEENEY, DANIEL**  
*Provider ID: 277369*  
*Board Certified Specialty: No*  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1497892954*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*






*American Sign Language (ASL):*  N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### INTERNAL MEDICINE CRITICAL CARE MEDICINE

**AMANN, CHRISTOPHER**  
*Provider ID: 277245*  
*Board Certified Specialty: No*  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1134326895*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, USC KENNETH  
NORRIS JR CANCER  
HOSPITAL, KECK HOSPITAL  
OF USC, USC VERDUGO HILLS  
HOSPITAL  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):* N  
N

*Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



### INTERNAL MEDICINE CRITICAL CARE MEDICINE

**BEGOVIC, ADNAN**  
*Provider ID: 277388*  
*Board Certified Specialty: No*  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1093791014*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
MEDICAL CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, UCSD LA JOLLA  
JOHN SALLY THORNTON  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 *Accessibility: CONTACT*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




### PROVIDER


 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **GOWDA, ASHWIN**

Provider ID: 277348  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1366736092

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE


#### **PAGE, BRADY**



Provider ID: 307660

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1528557550

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE



### CRITICAL CARE MEDICINE

#### **RAMNATH, VENKTESH**

Provider ID: 277358  
Board Certified Specialty: No  
UCSD MEDICAL GROUP



 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (760) 339-7202  
 After Hours Phone: (760)  
339-7202

Provider Gender: Male  
NPI: 1215911730

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Hospital Affiliation: TEMECULA  
VALLEY HOSPITAL INC,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
EL CENTRO REGIONAL  
MEDICAL CENTER, UCSD  
MEDICAL CTR, HEALDSBURG  
HOSPITAL, Providence  
Redwood Memorial Hospital,  
Providence Redwood Memorial  
Hospital, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **TRAN, LINH**

Provider ID: 277391  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


#### CRITICAL CARE MEDICINE


#### **WARDI, GABRIEL**

Provider ID: 277341

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (760) 339-7202

 After Hours Phone: (760)  
339-7202

Provider Gender: Male

NPI: 1720346083

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, EL CENTRO

REGIONAL MEDICAL CENTER,  
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,  
TEMECULA VALLEY HOSPITAL

INC, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### SURGERY NEUROLOGICAL

#### **BARBA, DAVID**

Provider ID: 244089

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1671 W MAIN ST STE B  
EL CENTRO, CA 92243


 Phone: (855) 543-0555

Fax: (888) 539-8781

 After Hours Phone: (855)  
543-0555

Provider Gender: Male

NPI: 1093730251

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ENCINITAS**


#### **CERTIFIED ACUPUNCTURIST**

#### **ARELLANO, JACQUELINE**

Provider ID: 304139

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

#### **GONZALEZ, ANDRES**

Provider ID: 298659

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1130 2ND ST  
ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

#### **JULIAN, FIDES**

Provider ID: 304133

Board Certified Specialty: No  
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **CARDINELL, ANNA**

Provider ID: 291412

Board Certified Specialty: No  
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1306978614

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **CHAMBERS, KATRINA**

Provider ID: 303521

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

781 GARDEN VIEW CT STE  
100

ENCINITAS, CA 92024

Phone: (760) 183-0441

Fax: (760) 635-5972

After Hours Phone: (760)  
183-0441

Provider Gender: Female

NPI: 1710695143

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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## D. 专家名录

### CERTIFIED NURSE PRACTITIONER

#### **DWYER, ERIN**

Provider ID: 301447

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760)  
436-4558

Provider Gender: Female

NPI: 1003260894

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **HEAD, KRISTIN**

Provider ID: 268657

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

#### **HOOPER, BONNIE**

Provider ID: 275253

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

477 N EL CAMINO REAL  
STE D308  
ENCINITAS, CA 92024

Phone: (760) 436-2300

Fax: (760) 436-5482

After Hours Phone: (760)

436-2300

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### CERTIFIED NURSE PRACTITIONER

#### **KORMANIK, PATRICIA**

Provider ID: 282071

Board Certified Specialty: No  
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD  
STE 200  
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 296268

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER


---

**LANE, KIMBERLY**

Provider ID: 301602

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 320 SANTA FE DR STE 108  
ENCINITAS, CA 92024

 Phone: (760) 436-4558

Fax: (858) 429-7926

 After Hours Phone: (760)  
436-4558

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---

**PAKENHAM, KATE**

Provider ID: 296268

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1130 2ND ST  
ENCINITAS, CA 92024

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1578299343


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-8PM  
M-F 8AM-8PM

SA 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER

---

**SRILASAK, MICHELE**

Provider ID: 281856

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
STE 200

ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1265487326

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

**YEO, ALEXANDRIA**

Provider ID: 299940

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1505 ENCINITAS BLVD  
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1902368319

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY


#### **PATEL, JANKI**

Provider ID: 305301


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 781 GARDEN VIEW CT STE 100

ENCINITAS, CA 92024

 Phone: (760) 783-0441


Fax: (760) 653-5972

 After Hours Phone: (760) 783-0441

Provider Gender: Female

NPI: 1548606668

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### GYNECOLOGIC ONCOLOGY

#### **ESKANDER, RAMEZ**

Provider ID: 282164

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1144486929

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HOSPICE AND PALLIATIVE MEDICINE

#### **RUBENSIK, TAMARA**

Provider ID: 245575

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD STE 100

ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

### HOSPICE AND PALLIATIVE MEDICINE

#### **RUBENZIK, TAMARA**

Provider ID: 282127

Board Certified Specialty: No  
UCSD MEDICAL GROUP

781 GARDEN VIEW RD  
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1811200652

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

#### **BALLAS, JERASIMOS**

Provider ID: 209562

Board Certified Specialty: No  
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE  
200

ENCINITAS, CA 92024

Phone: (858) 657-7200

After Hours Phone: (858)  
657-7200

Provider Gender: Male

NPI: 1871767384

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, EISENHOWER  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

#### **HULL, ANDREW**

Provider ID: 209483

Board Certified Specialty: No  
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE  
200

ENCINITAS, CA 92024

Phone: (858) 657-7200

After Hours Phone: (858)  
657-7200

Provider Gender: Male

NPI: 1902862121

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,  
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA  
JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

#### **LAURENT, LOUISE**

Provider ID: 208641

Board Certified Specialty: No  
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE  
200

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

ENCINITAS, CA 92024  
☎ Phone: (858) 657-7200  
🕒 After Hours Phone: (858) 657-7200  
Provider Gender: Female  
NPI: 1770532707  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**MOORE, THOMAS**  
Provider ID: 208645  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 781 GARDEN VIEW CT STE 200  
ENCINITAS, CA 92024  
☎ Phone: (858) 657-7200  
🕒 After Hours Phone: (858)

657-7200  
Provider Gender: Male  
NPI: 1184682379  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**RICHARDSON, ALVIE**  
Provider ID: 277315  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 477 N EL CAMINO REAL BLDG D STE 302  
ENCINITAS, CA 92024  
☎ Phone: (858) 966-6710  
☎ Fax: (858) 966-6711  
🕒 After Hours Phone: (858) 966-6710  
Provider Gender: Male  
NPI: 1154305977  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP




MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### MATERNAL AND FETAL MEDICINE




**WOELKERS, DOUGLAS**  
Provider ID: 209384  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 781 GARDEN VIEW CT STE 200  
ENCINITAS, CA 92024  
☎ Phone: (858) 657-7200  
🕒 After Hours Phone: (858) 657-7200  
Provider Gender: Male  
NPI: 1013965748  
☑ Provider English Spoken: Y  
☑ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, PALOMAR  
MEDICAL CENTER, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### MATERNAL AND FETAL MEDICINE

**WOLF, RICHARD**  
Provider ID: 209254  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 781 GARDEN VIEW CT STE  
200  
ENCINITAS, CA 92024  
 Phone: (858) 657-7200  
 After Hours Phone: (858)  
657-7200  
Provider Gender: Male  
NPI: 1497713846  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,





SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, PALOMAR  
MEDICAL CENTER, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

**BAI-TONG, SHIYU**  
Provider ID: 283286  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 354 SANTA FE DR  
ENCINITAS, CA 92024  
 Phone: (760) 633-6120  
 After Hours Phone: (760)  
633-6120  
Provider Gender: Female  
NPI: 1528454188  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

**NYMAN, KATHERINE**  
Provider ID: 301821  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 354 SANTA FE DR  
ENCINITAS, CA 92024  
 Phone: (760) 633-6120  
Fax: (760) 633-7385  
 After Hours Phone: (760)  
633-6120  
Provider Gender: Female  
NPI: 1003260951  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p>N 🗿 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Rady Childrens Health Network</p>	<p>SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N</p>	<p>Min/Max Age: 0\19 American Sign Language (ASL): N 🗿 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Rady Childrens Health Network</p>
<hr/> <p><b>NEONATAL / PERINATAL MEDICINE</b></p>	<hr/> <p>N 🗿 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: Rady Childrens Health Network</p>	<hr/> <p><b>NEUROLOGY</b></p>
<p><b>SAUER, CHARLES</b> Provider ID: 303905 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 📍 354 SANTA FE DR ENCINITAS, CA 92024 📞 Phone: (760) 633-6120 📠 Fax: (760) 633-7385 🕒 After Hours Phone: (760) 633-6120 Provider Gender: Male NPI: 1538388988 🗿 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,</p>	<hr/> <p><b>NEUROLOGY</b></p> <p><b>BUI, JONATHAN</b> Provider ID: 269966 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 📍 477 N EL CAMINO REAL STE 302 ENCINITAS, CA 92024 📞 Phone: (760) 944-6377 📠 Fax: (760) 944-3927 🕒 After Hours Phone: (760) 944-6377 Provider Gender: Male NPI: 1730247974 🗿 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes</p>	<hr/> <p><b>NEUROLOGY</b></p> <p><b>JINDAL, ANUJA</b> Provider ID: 206264 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 📍 477 N EL CAMINO REAL STE 302 ENCINITAS, CA 92024 📞 Phone: (760) 944-5545 📠 Fax: (760) 944-3927 🕒 After Hours Phone: (760) 944-5545 Provider Gender: Female NPI: 1194046581 🗿 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N 🗿 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM</p>

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## D. 专家名录


 Website: N/A  
IPA: Rady Childrens Health Network


### NEUROLOGY

#### **SCHORR, EMILY**

Provider ID: 305022  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY CHILD


#### **KIM MCMANUS, OLIVIA**

Provider ID: 206258


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
BLDG D STE 302

ENCINITAS, CA 92024


 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, CHILDRENS  
HOSPITAL OF ORANGE


COUNTY, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network

### NEUROLOGY CHILD


#### **SAHAGIAN, MICHELLE**

Provider ID: 206073

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network

### OBSTETRICS / GYNECOLOGY


#### **BINDER, PRATIBHA**

Provider ID: 282167

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
STE 200

ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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### THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **OBSTETRICS / GYNECOLOGY**

#### DELCORE, LAURA

Provider ID: 291325

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OBSTETRICS / GYNECOLOGY**

#### DRIEBE, AMY

Provider ID: 293448

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1505 ENCINITAS BLVD  
ENCINITAS, CA 92024


 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8372

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


---


### **OBSTETRICS / GYNECOLOGY**

#### DRIEBE, AMY

Provider ID: 293447

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 781 GARDEN VIEW CT STE  
200  
ENCINITAS, CA 92024

 Phone: (800) 926-8372


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8372

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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### **OBSTETRICS / GYNECOLOGY**

#### DRIEBE, AMY

Provider ID: 291336

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **OBSTETRICS / GYNECOLOGY**


#### **LAMALE-SMITH, LEAH**


*Provider ID: 208682*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 781 GARDEN VIEW CT STE  
200

ENCINITAS, CA 92024

 *Phone: (858) 657-7200*

 *After Hours Phone: (858)  
657-7200*

*Provider Gender: Female*

*NPI: 1396904876*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


---

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

*Provider ID: 303061*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1770702177*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **OPHTHALMOLOGY**

#### **BANSAL, PREETI**


*Provider ID: 205617*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 477 N EL CAMINO REAL

STE D302

ENCINITAS, CA 92024

 *Phone: (858) 309-7702  
Fax: (760) 944-3927*

 *After Hours Phone: (858)  
309-7702*

*Provider Gender: Female*

*NPI: 1871664631*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT*

*HOSPITAL, SHARP MARY*

*BIRCH HOSP FOR WOMEN  
AND NEWBORNS, SCRIPPS*

*MERCY HOSPITAL CHULA*

*VISTA, SCRIPPS MEMORIAL*

*HOSPITAL, TRI CITY MEDICAL  
CTR*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

---

### **OPHTHALMOLOGY**

#### **BHATIA, SHAGUN**

*Provider ID: 267315*


*Board Certified Specialty: No  
RADY CHILDRENS HEALTH*


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## D. 专家名录

### NETWORK

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545  
Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### OPHTHALMOLOGY

#### HENNEIN, LAUREN

Provider ID: 297012

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545  
Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### OPHTHALMOLOGY

#### MOLL, ANGELA

Provider ID: 205507

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545  
Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL  
HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL


OAKLAND, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network


### OPHTHALMOLOGY


#### MOVAGHAR, MANSOOR

Provider ID: 216413

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
BLD D STE 302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545





 After Hours Phone: (760)  
944-5545

Provider Gender: Male

NPI: 1497792220





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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

### **OPHTHALMOLOGY**








#### **O'HALLORAN, HENRY**

*Provider ID: 205886*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024  
 *Phone: (760) 944-5545*  
*Fax: (760) 944-3927*  
 *After Hours Phone: (760) 944-5545*  
*Provider Gender: Male*  
*NPI: 1235287947*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*


*CHULA VISTA*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **OPTOMETRIST**

#### **AOTO, KIM**

*Provider ID: 296797*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024  
 *Phone: (760) 943-7141*  
*Fax: (760) 943-0371*  
 *After Hours Phone: (760) 943-7141*  
*Provider Gender: Female*  
*NPI: 1780935650*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Vietnamese*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 9AM-5PM TU 8:30AM-4:30PM*




*W 7:30AM-4:30PM*  
*TH 9:30AM-5PM*  
*F 8:30AM-4PM*

 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*


### **OTOLARYNGOLOGY**




#### **BLISS, MORGAN**

*Provider ID: 206085*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 477 N EL CAMINO REAL STE 302 ENCINITAS, CA 92024  
 *Phone: (760) 944-5545*  
*Fax: (760) 944-3927*  
 *After Hours Phone: (760) 944-5545*

*Provider Gender: Female*  
*NPI: 1760707657*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### OTOLARYNGOLOGY

#### **FRIESEN, TZYYNONG**

Provider ID: 244900

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545

After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OTOLARYNGOLOGY

#### **LEUIN, SHELBY**

Provider ID: 206112

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1124230909

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OTOLARYNGOLOGY

#### **PATEL, VIJAY**

Provider ID: 297035

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC ALLERGY / IMMUNOLOGY

#### **GREINER, ALEXANDER**

Provider ID: 205696

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (858) 966-4900

Fax: (760) 944-3927

After Hours Phone: (858)  
966-4900

Provider Gender: Male

NPI: 1609801299

Provider English Spoken: Y

Provider Language(s)

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## D. 专家名录

Spoken: French, German, Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC CARDIOLOGY

#### **HALEY, JESSICA**

Provider ID: 205688

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 477 N EL CAMINO REAL STE D302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545  
Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1023329885


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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### PEDIATRIC CARDIOLOGY

#### **NARAYAN, HARI**

Provider ID: 239115

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 477 N EL CAMINO REAL BLDG D STE 302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545  
Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1376705707


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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### PEDIATRIC CARDIOLOGY

#### **SILVA SEPULVEDA, JOSE**

Provider ID: 206299

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 477 N EL CAMINO REAL BLDG D STE 302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545  
Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1417222472


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC

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## D. 专家名录

### **GASTROENTEROLOGY**

#### **CHU, CHRISTOPHER**

Provider ID: 301641

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545  
Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Male

NPI: 1912369273

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Yue  
Chinese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC GASTROENTEROLOGY**

#### **YOUNG, JOCELYN**

Provider ID: 294676

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545  
Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1306227491

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UC DAVIS  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC PULMONOLOGY**

#### **CERNELC-KOHAN, MATEJKA**

Provider ID: 243043

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE 302 BLDG D  
ENCINITAS, CA 92024

Phone: (760) 944-5545  
Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1871752451

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC PULMONOLOGY**

#### **LENHART-PENDERGRASS, PATRICIA**

Provider ID: 294642

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK




477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024




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## D. 专家名录






 Phone: (760) 944-5545  
Fax: (760) 944-3927  
 After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1144615659  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): Network  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network




### PEDIATRIC RHEUMATOLOGY

**CHANG, JOHANNA**  
Provider ID: 246395  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024  
 Phone: (760) 944-5545  
 After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1821242199  
 Provider English Spoken: Y








Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health

### PHYSICAL MEDICINE / REHABILITATION

**LEE, HAEWON**  
Provider ID: 256227  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 477 N EL CAMINO REAL STE C100 ENCINITAS, CA 92024  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1447661657  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Korean  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

**HIGGINS, JOSHUA**  
Provider ID: 287134  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1505 ENCINITAS BLVD ENCINITAS, CA 92024  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1861624181  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

---

#### KIVIAT, ANNETTE

Provider ID: 302454

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

Phone: (760) 944-5545  
Fax: (760) 944-5545

After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

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### PHYSICIANS ASSISTANT

---

#### PELIO, DARREN

Provider ID: 293443

Board Certified Specialty: No  
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

---

#### SUTTON, BRIAN

Provider ID: 272241

Board Certified Specialty: No  
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD  
STE 200  
ENCINITAS, CA 92024

Phone: (760) 598-1776  
Fax: (760) 598-5744

After Hours Phone: (760)  
598-1776

Provider Gender: Male

NPI: 1629174727

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### PHYSICIANS ASSISTANT

---

#### VANETSKY, GARY

Provider ID: 269152

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

477 N EL CAMINO REAL  
STE D308  
ENCINITAS, CA 92024

Phone: (760) 436-2300  
Fax: (760) 436-5482

After Hours Phone: (760)  
436-2300

Provider Gender: Male

NPI: 1417034489

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER









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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **PODIATRIST**

#### **DUSTIN, ADAM**

Provider ID: 275800  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 326 ENCINITAS BLVD STE 100  
ENCINITAS, CA 92024  
 Phone: (760) 436-5533  
Fax: (760) 436-0611  
 After Hours Phone: (760) 436-5533  
Provider Gender: Male  
NPI: 1043389026  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### **PSYCHOLOGIST**




#### **GOMEZ, JUANITA**

Provider ID: 291423  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1505 ENCINITAS BLVD  
ENCINITAS, CA 92024  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1790915759  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **PULMONARY DISEASES**






#### **BAUTISTA, JENNIFER**

Provider ID: 300863  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 326 SANTA FE DR STE 100  
ENCINITAS, CA 92024  
 Phone: (760) 230-8994  
Fax: (760) 944-1309  
 After Hours Phone: (760) 230-8994  
Provider Gender: Female  
NPI: 1770727034  
 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, COMMUNITY  
HOSPITAL OF THE MONTEREY  
PENINSULA, NATIVIDAD  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 21\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP




### **PULMONARY DISEASES**

#### **BAUTISTA, JENNIFER**

Provider ID: 297958  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 354 SANTA FE DR  
ENCINITAS, CA 92024  
 Phone: (760) 943-8806  
Fax: (760) 944-1309  
 After Hours Phone: (760) 943-8806  
Provider Gender: Female  
NPI: 1770727034  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS






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## D. 专家名录

MEMORIAL HOSPITAL  
ENCINITAS, COMMUNITY  
HOSPITAL OF THE MONTEREY  
PENINSULA, NATIVIDAD  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 21\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### PULMONARY DISEASES

#### **BAUTISTA, JENNIFER**




Provider ID: 297957  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 326 SANTA FE DR STE 100  
ENCINITAS, CA 92024  
 Phone: (760) 230-8994  
 Fax: (760) 944-1309  
 After Hours Phone: (760)  
230-8994  
 Provider Gender: Female  
 NPI: 1770727034  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, COMMUNITY  
HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 21\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### SURGERY COLON SURGERY







#### **PARRY, LISA**

Provider ID: 278552  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1200 GARDEN VIEW RD  
STE 200  
ENCINITAS, CA 92024  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Provider Gender: Female  
 NPI: 1235369067  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### SURGERY GENERAL

#### **ARMANI, AVA**

Provider ID: 282143  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1200 GARDEN VIEW RD  
STE 200  
ENCINITAS, CA 92024  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Provider Gender: Female  
 NPI: 1861759383  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: MEDICAL  
CTR AT UCSF, UCSF Medical  
Center At Mission Bay, UCSF  
MEDICAL CENTER AT MOUNT  
ZION, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

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## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group


### **SURGERY GENERAL**


#### **JACOBSEN, GARTH**

Provider ID: 201730

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

 Phone: (858) 657-8860

 After Hours Phone: (858)  
657-8860

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY PEDIATRIC**

#### **FAIRBANKS, TIMOTHY**

Provider ID: 205497

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **SURGERY PEDIATRIC**

#### **KLING, KAREN**


Provider ID: 206128

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, NATIONAL

NAVAL MED CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY PLASTIC**

#### **REID, CHRISTOPHER**

Provider ID: 238130

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

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## D. 专家名录






 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1982964276  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network, UCSD Medical Group

### ESCONDIDO

#### ANESTHESIOLOGY PAIN MANAGEMENT





##### **BROWNLOW, ROY**



Provider ID: 308112  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 637 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (760) 610-0522  
Fax: (760) 610-0523  
 After Hours Phone: (760) 610-0522  
Provider Gender: Male

NPI: 1205949914  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

#### ANESTHESIOLOGY PAIN MANAGEMENT





##### **DAIRO, BRANDON**

Provider ID: 300090  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1955 CITRACADO PKWY STE 203  
ESCONDIDO, CA 92029  
 Phone: (760) 738-5533  
Fax: (760) 738-3835  
 After Hours Phone: (760) 738-5533  
Provider Gender: Male  
NPI: 1689092470  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### ANESTHESIOLOGY PAIN MANAGEMENT

##### **DAIRO, BRANDON**

Provider ID: 299881  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1955 CITRACADO PKWY STE 203  
ESCONDIDO, CA 92029  
 Phone: (760) 738-5533  
Fax: (760) 738-3835  
 After Hours Phone: (760) 738-5533  
Provider Gender: Male  
NPI: 1689092470  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


MERCY HOSPITAL CHULA  
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **ANESTHESIOLOGY PAIN MANAGEMENT**


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**ROBINSON, COLE**

Provider ID: 300171

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 160 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (888) 873-6220

Fax: (888) 873-6220

 After Hours Phone: (888)  
873-6220

Provider Gender: Male

NPI: 1871799528


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-4PM  
SA 7AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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**HEAD, KRISTIN**

Provider ID: 277866

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)  
294-9260

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **CERTIFIED NURSE PRACTITIONER**

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**JANNESARI, ROYA**

Provider ID: 302339

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 625 CITRACADO PKWY STE  
108

ESCONDIDO, CA 92025

 Phone: (760) 743-1431


Fax: (760) 743-6455

 After Hours Phone: (760)  
743-1431

Provider Gender: Male

NPI: 1063585099

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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**KESHAVARZI, SARA**

Provider ID: 305938

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 488 E VALLEY PKWY STE  
411

ESCONDIDO, CA 92025

 Phone: (760) 466-9800

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

Fax: (360) 462-2741

☎ After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1457996126

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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#### **MCCARTHY, KATHRYN**

Provider ID: 298143

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025

☎ Phone: (760) 466-9800

Fax: (360) 462-2741

☎ After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1700850781

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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#### **PHELAN, ELISHA**

Provider ID: 307792

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 460 N ELM ST  
ESCONDIDO, CA 92025

☎ Phone: (833) 867-4642

Fax: (360) 462-2745

☎ After Hours Phone: (833) 867-4642

Provider Gender: Female

NPI: 1033424569

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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#### **WALDRUP, LA RHONDA**

Provider ID: 299259

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

☎ Phone: (442) 281-3193

Fax: (442) 281-3197

☎ After Hours Phone: (442) 281-3193

Provider Gender: Female

NPI: 1831627181

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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### **CERTIFIED REGISTERED NURSE ANESTHETIST**

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#### **SEILNACHT-BERNARD, KAREN**

Provider ID: 269203

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 488 E VALLEY PKWY

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## D. 专家名录

ESCONDIDO, CA 92025  
☎ Phone: (877) 217-8505  
Fax: (760) 735-6296  
🕒 After Hours Phone: (877) 217-8505  
Provider Gender: Female  
NPI: 1861562498  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 9AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **EMERGENCY MEDICINE**

**PHAM, LILY**  
Provider ID: 304936  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
☎ Phone: (760) 739-1543  
Fax: (760) 294-9274  
🕒 After Hours Phone: (760) 739-1543  
Provider Gender: Female  
NPI: 1811423072  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: Vietnamese  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### **ENDOCRINOLOGY METABOLISM DIABETES**

**REDDY, NAVYA**  
Provider ID: 302350  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 625 CITRACADO PKWY STE 108  
ESCONDIDO, CA 92025  
☎ Phone: (760) 743-1431  
Fax: (760) 743-6455  
🕒 After Hours Phone: (760) 743-1431  
Provider Gender: Female  
NPI: 1083069611  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**MATSHE, ZENZIWE**  
Provider ID: 306033  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 460 N ELM ST  
ESCONDIDO, CA 92025  
☎ Phone: (760) 520-8100  
Fax: (760) 466-1373  
🕒 After Hours Phone: (760) 520-8100  
Provider Gender: Female  
NPI: 1285256073  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **GASTROENTEROLOGY**

**GARA, NAVEEN**  
Provider ID: 269145  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 661 E PENNSYLVANIA AVE

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## D. 专家名录

ESCONDIDO, CA 92025  
☎ Phone: (760) 690-2800  
Fax: (760) 690-2801  
🕒 After Hours Phone: (760) 690-2800  
Provider Gender: Male  
NPI: 1942406533  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Hindi, Telugu  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### GASTROENTEROLOGY

**GARA, NAVEEN**  
Provider ID: 305691  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📄 935 E PENNSYLVANIA AVE  
ESCONDIDO, CA 92025  
☎ Phone: (760) 690-2800  
Fax: (949) 404-6908  
🕒 After Hours Phone: (760)  
690-2800

Provider Gender: Male  
NPI: 1942406533  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Hindi, Telugu  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### HEARING AID DEALER / SUPPLIER

**ANDERSON, ELAINE**  
Provider ID: 268690  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📄 330 W FELICITA AVE STE  
A4  
ESCONDIDO, CA 92025  
☎ Phone: (760) 489-1323  
Fax: (760) 489-0975  
🕒 After Hours Phone: (760)  
489-1323  
Provider Gender: Female  
NPI: 1063558856  
📄 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### INTERNAL MEDICINE

**CHEN, ANDREW**  
Provider ID: 296830  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📄 2130 CITRACADO  
PKWYSTE 220  
ESCONDIDO, CA 92029  
☎ Phone: (760) 743-4789  
Fax: (760) 743-8005  
🕒 After Hours Phone: (760)  
743-4789  
Provider Gender: Male  
NPI: 1134357007  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Community Care IPA LLC

### INTERNAL MEDICINE

#### **MALEK, MIKHAIL**

Provider ID: 296831

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2130 CITRACADO  
PKWYSTE 220  
ESCONDIDO, CA 92029

Phone: (760) 743-0546

Fax: (760) 317-9769

After Hours Phone: (760)  
743-0546

Provider Gender: Male

NPI: 1467455212

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **BAYAT, HAMED**

Provider ID: 296843

Board Certified Specialty: No

BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT

2130 CITRACADO  
PKWYSTE 220  
ESCONDIDO, CA 92029

Phone: (760) 743-0546

Fax: (760) 743-8837

After Hours Phone: (760)  
743-0546

Provider Gender: Male

NPI: 1356344196

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,  
Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **BAYAT, HAMED**

Provider ID: 296842

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2130 CITRACADO  
PKWYSTE 220

ESCONDIDO, CA 92029

Phone: (760) 743-0546

Fax: (760) 743-8837

After Hours Phone: (760)  
743-0546

Provider Gender: Male

NPI: 1356344196

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,  
Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **GILBERT, CHRISTOPHER**

Provider ID: 296839

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2130 CITRACADO  
PKWYSTE 220  
ESCONDIDO, CA 92029

Phone: (760) 430-0546

Fax: (760) 743-8837

After Hours Phone: (760)

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## D. 专家名录

430-0546  
Provider Gender: Male  
NPI: 1487657243  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

**SAWHNEY, NAVINDER**  
Provider ID: 304784  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 2130 CITRACADO  
PKWY STE 320  
ESCONDIDO, CA 92029  
 Phone: (858) 485-0130  
Fax: (858) 485-9424  
 After Hours Phone: (858)  
485-0130  
Provider Gender: Male  
NPI: 1619174133  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL  
CENTER, SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS GREEN  
HOSPITAL, UCSD MEDICAL  
CTR, SHARP MEMORIAL  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**  
Provider ID: 295845  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 488 E VALLEY PKWY STE  
107  
ESCONDIDO, CA 92025  
 Phone: (760) 294-0480  
Fax: (619) 616-2104  
 After Hours Phone: (760)  
294-0480  
Provider Gender: Female  
NPI: 1811307051  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
Provider ID: 296996  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
 Phone: (858) 966-6710  
Fax: (858) 966-6711  
 After Hours Phone: (858)  
966-6710  
Provider Gender: Female  
NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hungarian,  
Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network, UCSD Medical Group


### MATERNAL AND FETAL MEDICINE

#### **REIMERS, REBECCA**

Provider ID: 294655

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE

#### **LE, CRYSTAL**

Provider ID: 283707

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 Phone: (442) 281-3193

Fax: (442) 281-3197

 After Hours Phone: (442)  
281-3193

Provider Gender: Female

NPI: 1003028416

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST  
HEALTHCARE INLAND

VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE

#### **SAUER, CHARLES**

Provider ID: 206163

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 Phone: (442) 281-2850

Fax: (442) 281-2999

 After Hours Phone: (442)  
281-2850

Provider Gender: Male

NPI: 1538388988




 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
PALOMAR MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PALOMAR  
HEALTH, SCRIPPS MEMORIAL  
HOSPITAL, SOUTHWEST  
HEALTHCARE RANCHO  
SPRINGS HOSPITAL,

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## D. 专家名录


SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **SUTTNER, DENISE**

Provider ID: 206137  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 Phone: (442) 281-2850  
Fax: (442) 281-2999

 After Hours Phone: (442)  
281-2850


Provider Gender: Female

NPI: 1457433799

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

#### **SWEENEY, NATHALY**

Provider ID: 283801  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 Phone: (442) 281-3193  
Fax: (442) 281-3197

 After Hours Phone: (442)  
281-3193

Provider Gender: Female


NPI: 1164572632

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network

### NEPHROLOGY

#### **AL-DAHAN, ZAID**

Provider ID: 297898  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 631 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (760) 294-1660  
Fax: (760) 745-5016

 After Hours Phone: (760)  
294-1660

Provider Gender: Male

NPI: 1740716828

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: PALOMAR

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## D. 专家名录

MEDICAL CENTER, PALOMAR HEALTH  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### NEUROLOGY

**GOLD, JEFFREY**  
 Provider ID: 277870  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100  
 ESCONDIDO, CA 92029  
 Phone: (760) 294-9260  
 Fax: (760) 294-9274  
 After Hours Phone: (760) 294-9260  
 Provider Gender: Male  
 NPI: 1568773984  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### NEUROLOGY

**JINDAL, ANUJA**  
 Provider ID: 277838  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100  
 ESCONDIDO, CA 92029  
 Phone: (760) 294-9260  
 Fax: (760) 294-9274  
 After Hours Phone: (760) 294-9260  
 Provider Gender: Female  
 NPI: 1194046581  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

Website: N/A  
 IPA: Rady Childrens Health Network

### NEUROLOGY

**KIM MCMANUS, OLIVIA**  
 Provider ID: 277873  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100  
 ESCONDIDO, CA 92029  
 Phone: (858) 966-5819  
 Fax: (760) 294-9274  
 After Hours Phone: (858) 966-5819  
 Provider Gender: Female  
 NPI: 1174870067  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

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## D. 专家名录

### NEUROLOGY

#### **ZIMBRIC, MICHAEL**

Provider ID: 277891

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)  
294-9260

Provider Gender: Male

NPI: 1487819546

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEUROLOGY CHILD

#### **SAHAGIAN, MICHELLE**

Provider ID: 206076

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

625 CITRACADO PKWY STE  
100

ESCONDIDO, CA 92025

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)  
294-9260

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OBSTETRICS / GYNECOLOGY

#### **HINSHAW, PAUL**

Provider ID: 285628

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY  
STE 302

ESCONDIDO, CA 92029

Phone: (760) 233-1896

Fax: (760) 233-1899

After Hours Phone: (760)  
233-1896

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 9AM-4:30PM  
F 9AM-2PM

Website: N/A

IPA: Community Care IPA LLC,  
Rady Childrens Health  
Network

### OBSTETRICS / GYNECOLOGY

#### **HINSHAW, PAUL**

Provider ID: 285629

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE  
400

ESCONDIDO, CA 92025

Phone: (760) 658-6101

Fax: (760) 658-6106


After Hours Phone: (760)  
658-6101

Provider Gender: Male

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## D. 专家名录

NPI: 1215170717

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-4:30PM  
F 9AM-2PM

 Website: N/A


IPA: Community Care IPA LLC,  
Rady Childrens Health  
Network


### **OBSTETRICS / GYNECOLOGY**

#### **HINSHAW, PAUL**

Provider ID: 277040

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 1955 CITRACADO PKWY  
STE 302  
ESCONDIDO, CA 92029

 Phone: (760) 233-1896

Fax: (760) 233-1899

 After Hours Phone: (760)  
233-1896

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-4:30PM  
F 9AM-2PM

 Website: N/A


IPA: Community Care IPA LLC,  
Rady Childrens Health  
Network


### **OBSTETRICS / GYNECOLOGY**

#### **HINSHAW, PAUL**


Provider ID: 277041

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 488 E VALLEY PKWY STE  
400  
ESCONDIDO, CA 92025

 Phone: (760) 658-6101

Fax: (760) 658-6106

 After Hours Phone: (760)  
658-6101

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TH 9AM-4:30PM  
F 9AM-2PM

 Website: N/A


IPA: Community Care IPA LLC,  
Rady Childrens Health  
Network


### **OBSTETRICS / GYNECOLOGY**

#### **LAMALE-SMITH, LEAH**


Provider ID: 285518

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 2125 CITRACADO PKWY  
STE 210  
ESCONDIDO, CA 92029

 Phone: (760) 739-2921


Fax: (760) 739-3162

 After Hours Phone: (760)  
739-2921

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None



American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **BANSAL, PREETI**

Provider ID: 277883  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
 Phone: (760) 755-7600  
Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600



Provider Gender: Female  
NPI: 1871664631

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL, TRI CITY MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N



 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **OPHTHALMOLOGY**


#### **BHATIA, SHAGUN**

Provider ID: 277877  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
 Phone: (760) 755-7600  
Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600



Provider Gender: Female  
NPI: 1104237353

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A



IPA: Rady Childrens Health

Network

### **OPHTHALMOLOGY**


#### **HENNEIN, LAUREN**

Provider ID: 297014  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
 Phone: (760) 755-7600  
Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600



Provider Gender: Female  
NPI: 1699216010

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: Rady Childrens Health  
Network

### **OPHTHALMOLOGY**

#### **MOLL, ANGELA**

Provider ID: 277824  
Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OPHTHALMOLOGY

#### MOLL, ANGELA

Provider ID: 205895

### Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

625 CITRACADO PKWY STE  
206  
ESCONDIDO, CA 92025

Phone: (760) 755-7600

After Hours Phone: (760)  
755-7600

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OPHTHALMOLOGY

#### MOVAGHAR, MANSOOR

Provider ID: 277833

### Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### OPHTHALMOLOGY

#### O'HALLORAN, HENRY



Provider ID: 277869

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Phone: (760) 755-7600  
 Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network



### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 305307

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 700 W EL NORTE PKWY  
ESCONDIDO, CA 92026

 Phone: (800) 765-2737  
 Fax: (619) 291-6577

 After Hours Phone: (800) 765-2737

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8:30AM-4PM  
W-F 8:30AM-1PM

 Website: N/A


IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group



### **OPTOMETRIST**

#### **AOTO, KIM**

Provider ID: 296796



Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026

 Phone: (760) 743-5872  
 Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Provider Gender: Female  
NPI: 1780935650

 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Vietnamese  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9AM-5PM  
TU 8:30AM-4:30PM  
W 7:30AM-4:30PM  
TH 9:30AM-5PM  
F 8:30AM-4PM

 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP



### **OPTOMETRIST**

#### **AOTO, KIM**

Provider ID: 268719

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 830 W VALLEY PKWY STE  
300  
ESCONDIDO, CA 92025

 Phone: (800) 898-2020  
 Fax: (844) 897-3788

 After Hours Phone: (800) 898-2020

Provider Gender: Female  
NPI: 1780935650

 Provider English Spoken: Y  
 Provider Language(s)


Spoken: Vietnamese  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KOO, ANITA**

Provider ID: 307410

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1118 W VALLEY PKWY  
ESCONDIDO, CA 92025

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)  
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KOO, ANITA**

Provider ID: 307411

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1118 W VALLEY PKWY  
ESCONDIDO, CA 92025

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)  
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OTOLARYNGOLOGY**

#### **BLISS, MORGAN**

Provider ID: 277537

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **OTOLARYNGOLOGY**

#### **FRIESEN, TZYYNONG**

Provider ID: 277853

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

<hr/> <b>OTOLARYNGOLOGY</b> <hr/> <b>JIANG, WEN</b> Provider ID: 277860 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029 Phone: (760) 755-7600 Fax: (760) 755-7699 After Hours Phone: (760) 755-7600 Provider Gender: Female NPI: 1659305753 Provider English Spoken: Y Provider Language(s) Spoken: Mandarin Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network	Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 625 CITRACADO PKWY STE 206 ESCONDIDO, CA 92025 Phone: (760) 755-7600 Fax: (760) 755-7699 After Hours Phone: (760) 755-7600 Provider Gender: Female NPI: 1124230909 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network	2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029 Phone: (760) 755-7600 Fax: (760) 755-7699 After Hours Phone: (760) 755-7600 Provider Gender: Male NPI: 1508250747 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network
<hr/> <b>OTOLARYNGOLOGY</b> <hr/> <b>LEUIN, SHELBY</b> Provider ID: 206110	<hr/> <b>OTOLARYNGOLOGY</b> <hr/> <b>PATEL, VIJAY</b> Provider ID: 297038 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	<hr/> <b>PEDIATRIC CARDIOLOGY</b> <hr/> <b>DAVIS, CHRISTOPHER</b> Provider ID: 277811 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029 Phone: (760) 294-9260 Fax: (760) 294-9274

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (760) 294-9260*

*Provider Gender: Male*

*NPI: 1760691950*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO, GROSSMONT*

*HOSPITAL, SCRIPPS*

*MEMORIAL HOSPITAL, SHARP*

*MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health*

*Network*

### **PEDIATRIC CARDIOLOGY**

#### **HALEY, JESSICA**

*Provider ID: 205689*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

*NETWORK*

📍 625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025

☎ *Phone: (760) 294-9260*

*Fax: (760) 294-9274*

☎ *After Hours Phone: (760) 294-9260*

*Provider Gender: Female*

*NPI: 1023329885*

☑ *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health*

*Network*

### **PEDIATRIC CARDIOLOGY**

#### **HALEY, JESSICA**

*Provider ID: 277867*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

*NETWORK*

📍 2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

☎ *Phone: (760) 294-9260*

*Fax: (760) 294-9274*

☎ *After Hours Phone: (760) 294-9260*

*Provider Gender: Female*

*NPI: 1023329885*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health*

*Network*

### **PEDIATRIC CARDIOLOGY**

#### **NARAYAN, HARI**

*Provider ID: 277846*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH*

*NETWORK*

📍 2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

☎ *Phone: (760) 294-9260*

*Fax: (760) 294-9274*

☎ *After Hours Phone: (760) 294-9260*

*Provider Gender: Male*

*NPI: 1376705707*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*



*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*









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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network


### PEDIATRIC CARDIOLOGY

#### **SAH, SERENA**

Provider ID: 301737  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
 Phone: (760) 294-9260  
Fax: (760) 294-9274  
 After Hours Phone: (760) 294-9260  
Provider Gender: Female  
NPI: 1295042653  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Chinese, Mandarin  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC CARDIOLOGY

#### **SILVA SEPULVEDA, JOSE**









Provider ID: 206298  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 625 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92025  
 Phone: (760) 294-9260  
Fax: (760) 294-9274  
 After Hours Phone: (760) 294-9260  
Provider Gender: Male  
NPI: 1417222472  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **AGHILI, ROXANA**

Provider ID: 303783  
Board Certified Specialty: No

### RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
Fax: (760) 294-9274  
 After Hours Phone: (760) 739-1543  
Provider Gender: Female  
NPI: 1851927883  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **BELLOMO, THOMAS**

Provider ID: 277865  
Board Certified Specialty: No

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## D. 专家名录

### **RADY CHILDRENS HEALTH NETWORK**

2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)  
739-1543

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC EMERGENCY**

### **MEDICINE**

### **BETTY, MARYANN RIVA**

Provider ID: 277914

Board Certified Specialty: No  
**RADY CHILDRENS HEALTH  
NETWORK**

2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)  
739-1543

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC EMERGENCY**

### **MEDICINE**

### **GORHAM, LAURA**

Provider ID: 277851

Board Certified Specialty: No  
**RADY CHILDRENS HEALTH  
NETWORK**

2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)  
739-1543

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC EMERGENCY**

### **MEDICINE**

### **GROSS, MATTHEW**

Provider ID: 297178

Board Certified Specialty: No  
**RADY CHILDRENS HEALTH  
NETWORK**


2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## D. 专家名录

 Phone: (760) 739-1543  
Fax: (760) 294-9274  
 After Hours Phone: (760) 739-1543  
Provider Gender: Male  
NPI: 1942223664  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **JOSHI, WEENA**

Provider ID: 277907  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
Fax: (760) 294-9274  
 After Hours Phone: (760)

739-1543  
Provider Gender: Female  
NPI: 1376862177  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE





#### **LOVEJOY, AMY**

Provider ID: 277884  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
Fax: (760) 294-9274  
 After Hours Phone: (760) 739-1543  
Provider Gender: Female  
NPI: 1790856557

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health Network




### PEDIATRIC EMERGENCY MEDICINE


#### **MENDES, CHANTAL**

Provider ID: 295670  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
Fax: (760) 294-9274  
 After Hours Phone: (760) 739-1543  
Provider Gender: Female  
NPI: 1134681265  
 Provider English Spoken: Y  
Cultural Competency: N

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## D. 专家名录

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*




*CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

*CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*



### PEDIATRIC EMERGENCY MEDICINE

**MINKA, GENEVIEVE**  
*Provider ID: 277859*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029  
 *Phone: (760) 739-1543*  
*Fax: (760) 294-9274*  
 *After Hours Phone: (760) 739-1543*  
*Provider Gender: Female*  
*NPI: 1689646689*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: French*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY*

### PEDIATRIC EMERGENCY MEDICINE




**OZAKI, YOSHIHIRO**  
*Provider ID: 277902*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029  
 *Phone: (760) 739-1543*  
*Fax: (760) 294-9274*  
 *After Hours Phone: (760) 739-1543*  
*Provider Gender: Male*  
*NPI: 1467898239*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Japanese*  
*Cultural Competency: N*  
*Hospital Affiliation: VALLEY*




### PEDIATRIC EMERGENCY MEDICINE




**PARKER, SHERINE**  
*Provider ID: 277872*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029  
 *Phone: (760) 739-1543*  
*Fax: (760) 294-9274*  
 *After Hours Phone: (760) 739-1543*  
*Provider Gender: Female*  
*NPI: 1477626513*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP*

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## D. 专家名录

AND HEALTH CTR, TRI CITY  
 MEDICAL CTR, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, VALLEY CHILDRENS  
 HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network





Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network

SANTA MONICA UCLA MED  
 CTR, RADY CHILDRENS  
 HOSPITAL SAN DIEGO, UCSD  
 MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network





### PEDIATRIC EMERGENCY MEDICINE

**QUINONES-PEREZ, BIANCA**  
 Provider ID: 277810  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 2125 CITRACADO PKWY  
 STE 100  
 ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
 Fax: (760) 294-9274  
 After Hours Phone: (760)  
 739-1543  
 Provider Gender: Female  
 NPI: 1124360565  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish

### PEDIATRIC EMERGENCY MEDICINE

**TODD, SARAH**  
 Provider ID: 302802  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 2125 CITRACADO PKWY  
 STE 100  
 ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
 Fax: (760) 294-9274  
 After Hours Phone: (760)  
 739-1543  
 Provider Gender: Female  
 NPI: 1407299787  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RONALD  
 REAGAN UCLA MED CTR,

### PEDIATRIC EMERGENCY MEDICINE





**VAIDYA, KAMALA**  
 Provider ID: 205812  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 625 CITRACADO PKWY STE  
 100  
 ESCONDIDO, CA 92025  
 Phone: (760) 739-1543  
 Fax: (760) 294-9274  
 After Hours Phone: (760)  
 739-1543  
 Provider Gender: Female  
 NPI: 1083840920  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN




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## D. 专家名录





**DIEGO**  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

**VAIDYA, KAMALA**  
 Provider ID: 289412  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
 Fax: (760) 294-9274  
 After Hours Phone: (760) 739-1543  
 Provider Gender: Female  
 NPI: 1083840920  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):





N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

**WANG, EMILY**  
 Provider ID: 277868  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029  
 Phone: (760) 739-1543  
 Fax: (760) 294-9274  
 After Hours Phone: (760) 739-1543  
 Provider Gender: Female  
 NPI: 1427142363  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health Network




### PEDIATRIC GASTROENTEROLOGY

**CHU, CHRISTOPHER**  
 Provider ID: 301643  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029  
 Phone: (760) 294-9260  
 Fax: (760) 294-9274  
 After Hours Phone: (760) 294-9260  
 Provider Gender: Male  
 NPI: 1912369273  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish, Yue Chinese  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19

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## D. 专家名录

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network



### PEDIATRIC GASTROENTEROLOGY

#### **PATHAK, SAGAR**


Provider ID: 301826  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK



 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
 Phone: (760) 294-9260  
Fax: (760) 294-9274  
 After Hours Phone: (760)  
294-9260

Provider Gender: Male  
NPI: 1700318292

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Gujarati, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network


### PEDIATRICS

#### **CAMERON, MELISSA**

Provider ID: 205966  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029  
 Phone: (442) 281-2850  
Fax: (442) 281-2999  
 After Hours Phone: (442)  
281-2850



Provider Gender: Female  
NPI: 1902983752

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRICS



#### **FIGUEROA RODRIGUEZ, BRENDA**

Provider ID: 306823  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (833) 867-4642  
Fax: (858) 633-4693

 After Hours Phone: (833)  
867-4642

Provider Gender: Female  
NPI: 1134205214



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: Sharp

Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICAL MEDICINE / REHABILITATION

#### **RICHARDSON, HENRY**

Provider ID: 295277  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1955 CITRACADO PKWY

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## D. 专家名录

STE 203  
ESCONDIDO, CA 92029  
☎ Phone: (760) 738-5533  
☎ Fax: (909) 204-7863  
📞 After Hours Phone: (760)  
738-5533  
Provider Gender: Male  
NPI: 1407052459  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICAL MEDICINE / REHABILITATION**

**RYAN, KYLE**  
Provider ID: 275660  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 625 CITRACADO PKWY  
ESCONDIDO, CA 92025  
☎ Phone: (760) 294-9260  
☎ Fax: (760) 294-9274  
📞 After Hours Phone: (760)

294-9260  
Provider Gender: Male  
NPI: 1447645742  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### **PHYSICIANS ASSISTANT**

**CHATFIELD, ALEXANDRA**  
Provider ID: 276716  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 1955 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
☎ Phone: (760) 743-4789  
☎ Fax: (858) 673-5187  
📞 After Hours Phone: (760)  
743-4789  
Provider Gender: Female  
NPI: 1215584628  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT

PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **PHYSICIANS ASSISTANT**

**CORVINI, NICOLAS**  
Provider ID: 296999  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 425 N DATE ST  
ESCONDIDO, CA 92025  
☎ Phone: (760) 520-8300  
☎ Fax: (858) 633-4698  
📞 After Hours Phone: (760)  
520-8300  
Provider Gender: Male  
NPI: 1194242461  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

**FUNARI, CHRISTOPHER**  
Provider ID: 301993  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 625 CITRACADO PKWY STE  
108

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

ESCONDIDO, CA 92025  
Phone: (760) 743-1431  
Fax: (760) 743-6455  
After Hours Phone: (760) 743-1431  
Provider Gender: Male  
NPI: 1982365490  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

**GANGJI, SHAZMIN**  
Provider ID: 298110  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
Fax: (360) 462-2745  
After Hours Phone: (760) 520-8100  
Provider Gender: Female  
NPI: 1346763638  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 14\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

**KIVIAT, ANNETTE**  
Provider ID: 302456  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
Phone: (760) 294-9260  
Fax: (760) 294-9274

After Hours Phone: (760) 294-9260  
Provider Gender: Female  
NPI: 1205381845  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Rady Childrens Health Network

### **PHYSICIANS ASSISTANT**

**MEHTA, NOOPUR**  
Provider ID: 297093  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
Fax: (760) 466-1373  
After Hours Phone: (760) 520-8100  
Provider Gender: Female  
NPI: 1417682931

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

**MONTES, VIVIAN**  
Provider ID: 298090  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
728 E VALLEY PKWY  
ESCONDIDO, CA 92025

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Phone: (760) 737-6900  
Fax: (360) 462-2741

After Hours Phone: (760)  
737-6900

Provider Gender: Female  
NPI: 1881358026

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### NIAKAMAL, EVAN

Provider ID: 291250

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8340  
Fax: (858) 633-4698

After Hours Phone: (760)  
520-8340

Provider Gender: Male  
NPI: 1639796873

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### WALSH, JOHN

Provider ID: 301971

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

625 CITRACADO PKWY STE  
108  
ESCONDIDO, CA 92025

Phone: (760) 743-1431  
Fax: (760) 743-6455

After Hours Phone: (760)  
743-1431

Provider Gender: Male  
NPI: 1386893089

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### WRIGHT, DEREK

Provider ID: 302390

1955 CITRACADO PKWY  
ESCONDIDO, CA 92029

Phone: (760) 738-5533  
Fax: (760) 738-3835

After Hours Phone: (760)  
738-5533

Provider Gender: Male  
NPI: 1629674858

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### PODIATRIST

#### ALGHURAIBI, OHOUD

Provider ID: 295998

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

460 N ELM ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8100  
Fax: (760) 466-1373

After Hours Phone: (760)  
520-8100

Provider Gender: Female  
NPI: 1669842357

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### PODIATRIST


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#### LARKINS, PHILIP

Provider ID: 297044

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
ESCONDIDO, CA 92025


 Phone: (760) 520-8100

Fax: (360) 462-2745

 After Hours Phone: (760)  
520-8100

Provider Gender: Male

NPI: 1659375103

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: CLOVIS  
COMMUNITY HOSPITAL, ST  
AGNES MEDICAL CENTER,  
MADERA COMMUNITY  
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### PODIATRIST


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#### READ, TRENTON


Provider ID: 300882

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 215 S HICKORY ST STE 118  
ESCONDIDO, CA 92025


 Phone: (760) 480-1189

Fax: (858) 485-1515

 After Hours Phone: (760)  
480-1189

Provider Gender: Male

NPI: 1952963431

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

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### PODIATRIST


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#### READ, TRENTON

Provider ID: 296654

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 215 S HICKORY ST STE 118  
ESCONDIDO, CA 92025

 Phone: (760) 480-1189

Fax: (858) 485-1515

 After Hours Phone: (760)  
480-1189

Provider Gender: Male

NPI: 1952963431

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

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### PSYCHOLOGIST


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#### CARLTON-PENN, CORNELIA

Provider ID: 290406

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST  
ESCONDIDO, CA 92025




 Phone: (760) 520-8340

Fax: (360) 462-2752




 After Hours Phone: (760)




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




520-8340  
Provider Gender: Female  
NPI: 1891720611  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

**ESTRADA PATINO, ANGELA**  
Provider ID: 296605  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
Fax: (760) 466-1373  
 After Hours Phone: (760)  
520-8100  
Provider Gender: Female  
NPI: 1629339015  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-0PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


### PSYCHOLOGIST



**SUOZZO, JOSEPH**  
Provider ID: 290758  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8340  
Fax: (858) 633-4698  
 After Hours Phone: (760)  
520-8340

Provider Gender: Male  
NPI: 1821013228  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




### PSYCHOLOGIST

**TEETER-WITT, ALYSSA**  
Provider ID: 290891  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8300  
Fax: (858) 633-4698  
 After Hours Phone: (760)  
520-8300

Provider Gender: Female  
NPI: 1932308442  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

**TEETER-WITT, ALYSSA**  
Provider ID: 290779  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 426 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 690-5900  
Fax: (858) 633-4693  
 After Hours Phone: (760)  
690-5900  
Provider Gender: Female  
NPI: 1932308442  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p>N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025 Phone: (760) 466-9800 Fax: (858) 633-4693 After Hours Phone: (760) 466-9800 Provider Gender: Female NPI: 1710902143 Provider English Spoken: Y Provider Language(s) Spoken: German, Spanish Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p>
<p><b>PSYCHOLOGIST</b></p>		<p><b>PSYCHOLOGIST</b></p>
<p><b>VALLEZ-BARLAM, ANDREA</b> Provider ID: 290630 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 426 N DATE ST ESCONDIDO, CA 92025 Phone: (760) 690-5900 Fax: (858) 633-4693 After Hours Phone: (760) 690-5900 Provider Gender: Female NPI: 1710902143 Provider English Spoken: Y Provider Language(s) Spoken: German, Spanish Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p><b>WOODWORTH, JENNIFER</b> Provider ID: 290634 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 425 N DATE ST ESCONDIDO, CA 92025 Phone: (760) 520-8340 Fax: (858) 633-4698 After Hours Phone: (760) 520-8340 Provider Gender: Female NPI: 1639362494 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p>	
<p><b>PSYCHOLOGIST</b></p>	<p><b>PSYCHOLOGIST</b></p>	<p><b>PULMONARY DISEASES</b></p>
<p><b>VALLEZ-BARLAM, ANDREA</b> Provider ID: 290631 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p>	<p><b>VAQUERO, JUANA</b> Provider ID: 290762 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 425 N DATE ST ESCONDIDO, CA 92025 Phone: (760) 520-8300 Fax: (858) 633-4698 After Hours Phone: (760) 520-8300 Provider Gender: Female NPI: 1023459708 Provider English Spoken: Y Cultural Competency: N</p>	<p><b>QUAN, MICHELE</b> Provider ID: 287097 Board Certified Specialty: No</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### COMMUNITY CARE IPA LLC

2125 CITRACADO PKWY  
STE 230  
ESCONDIDO, CA 92029

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)  
489-1458

Provider Gender: Female

NPI: 1629462882

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: REDLANDS  
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

#### **COLEMAN, LORI**

Provider ID: 221090

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2125 CITRACADO PKWY  
STE 110  
ESCONDIDO, CA 92029

Phone: (760) 739-3371

Fax: (760) 739-3779

After Hours Phone: (760)  
739-3371

Provider Gender: Female

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

#### **VOLPP, PAUL**

Provider ID: 221103

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2125 CITRACADO PKWY  
STE 110  
ESCONDIDO, CA 92029

Phone: (760) 739-3371

Fax: (760) 739-3779

After Hours Phone: (760)  
739-3371

Provider Gender: Male

NPI: 1225186232

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

#### **WEINSTEIN, GEOFFREY**

Provider ID: 220041

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2125 CITRACADO PKWY  
STE 110  
ESCONDIDO, CA 92029

Phone: (760) 739-3371

Fax: (760) 739-3779

After Hours Phone: (760)  
739-3371

Provider Gender: Male

NPI: 1841233947

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

SHARP MEMORIAL HOSPITAL, IPA: Community Care IPA LLC  
SHARP CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### RADIOLOGY DIAGNOSTIC


#### **VAKILIAN, SIAVOSH**

Provider ID: 283206

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 701 E GRAND AVE STE 200  
ESCONDIDO, CA 92025

 Phone: (619) 230-0400

Fax: (858) 429-7936

 After Hours Phone: (619)  
230-0400

Provider Gender: Male

NPI: 1427456151

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


### REGISTERED PHYSICAL THERAPIST


#### **MC GEE, JACQUELINE**

Provider ID: 252473

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 1815 E VALLEY PKWY STE 5  
ESCONDIDO, CA 92027

 Phone: (760) 233-9655

Fax: (760) 233-9648

 After Hours Phone: (760)  
233-9655

Provider Gender: Female

NPI: 1194217133

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 8\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-6PM

 Website: N/A

IPA: Community Care IPA LLC

### SPEECH PATHOLOGIST

#### **AROCHO-SALGADO, MIRELIS**


Provider ID: 296931

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD  
STE 150

ESCONDIDO, CA 92025


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### SPEECH PATHOLOGIST

#### **CLARK, MELISSA**


Provider ID: 296924

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD  
STE 150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): **CASILLAS BERUMEN, SERGIO**  
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 7AM-7PM  
M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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### **SPEECH PATHOLOGIST**

**DURNAN, CASSANDRA**

Provider ID: 307881

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD  
STE 150  
ESCONDIDO, CA 92025


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


---

### **SURGERY GENERAL**

Provider ID: 304606

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1045 E PENNSYLVANIA  
AVE  
ESCONDIDO, CA 92025


 Phone: (760) 884-4500

Fax: (619) 567-7775

 After Hours Phone: (760)  
884-4500

Provider Gender: Male

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PARADISE VALLEY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MERCY HOSPITAL,

PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **SURGERY GENERAL**


**GROVE, JAY**

Provider ID: 245226


Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 Phone: (760) 300-3647

Fax: (760) 482-1316

 After Hours Phone: (760)  
300-3647

Provider Gender: Male

NPI: 1912971334

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### **SURGERY ORTHOPEDIC**

**EDMONDS, ERIC**

Provider ID: 277831

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

Phone: (760) 480-8770

Fax: (760) 480-8811

After Hours Phone: (760)  
480-8770

Provider Gender: Male

NPI: 1013048412

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**

#### **KNUTSON, THOMAS**

Provider ID: 296851

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2130 CITRACADO

PKWYSTE 200

ESCONDIDO, CA 92029

Phone: (760) 743-4789

Fax: (760) 743-4779

After Hours Phone: (760)  
743-4789

Provider Gender: Male

NPI: 1962409938

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC

### **SURGERY ORTHOPEDIC**

#### **SHARP, LORRA**

Provider ID: 304761

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2130 CITRACADO

PKWYSTE 220

ESCONDIDO, CA 92029

Phone: (760) 743-0546

Fax: (760) 317-9769

After Hours Phone: (760)  
743-0546

Provider Gender: Female

NPI: 1689689176

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: POMONA

VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC

### **SURGERY ORTHOPEDIC**

#### **SHARP, LORRA**

Provider ID: 296808

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2130 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

Phone: (760) 743-4789

Fax: (858) 385-1690

After Hours Phone: (760)  
743-4789

Provider Gender: Female

NPI: 1689689176

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: POMONA

VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **SURGERY PEDIATRIC**

#### **KLING, KAREN**

Provider ID: 206130

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

625 CITRACADO PKWY STE  
206

ESCONDIDO, CA 92025

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND

NEWBORNS, NATIONAL  
NAVAL MED CTR, SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **FALLBROOK**

#### **CERTIFIED ACUPUNCTURIST**

#### **CRAFT, KEVIN**

Provider ID: 290943

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1309 S MISSION RD

FALLBROOK, CA 92028

Phone: (760) 690-5900

Fax: (760) 731-1063

After Hours Phone: (760)  
690-5900

Provider Gender: Male

NPI: 1659745610

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: TU-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **GUIDI, CASEY**

Provider ID: 296010

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1328 S MISSION RD

FALLBROOK, CA 92028

Phone: (760) 451-4730

Fax: (760) 457-4700

After Hours Phone: (760)  
451-4730

Provider Gender: Female

NPI: 1013349919

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

#### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **KELLEHER, BRIDGET**

Provider ID: 298086

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

321 E ALVARADO ST

FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)  
723-6200

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)




Spoken: Spanish

Cultural Competency: N






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## D. 专家名录

Hospital Affiliation: TRI CITY  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network


**CERTIFIED NURSE  
PRACTITIONER**

**KELLEHER, BRIDGET**  
Provider ID: 299775  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
723-6200  
Provider Gender: Female  
NPI: 1245695006  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR








Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

**CERTIFIED NURSE  
PRACTITIONER**

**STOJANOVSKA, JOVANA**  
Provider ID: 301367  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1328 S MISSION RD  
FALLBROOK, CA 92028  
 Phone: (760) 451-4730  
Fax: (760) 451-4700  
 After Hours Phone: (760)  
451-4730  
Provider Gender: Female  
NPI: 1215638499  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

 Website: N/A  
 IPA: IHP of Southern Cal-PHP

**CERTIFIED NURSE  
PRACTITIONER**

**TAYLOR, CHRISTOPHER**  
Provider ID: 299407  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
723-6200  
Provider Gender: Male  
NPI: 1851747166  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 5\100  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-4PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

**CERTIFIED NURSE  
PRACTITIONER**


**TAYLOR, CHRISTOPHER**  
Provider ID: 302118  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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## D. 专家名录

### NETWORK

 321 E ALVARADO ST  
FALLBROOK, CA 92028


 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)  
723-6200

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

### CHIROPRACTOR


#### FARSHLER, ANTHONY

Provider ID: 290306

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1309 S MISSION RD  
FALLBROOK, CA 92028

 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)  
690-5900

Provider Gender: Male

NPI: 1841627759

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### CHIROPRACTOR


#### HALVORSON, PAULA

Provider ID: 298338

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1309 S MISSION RD  
FALLBROOK, CA 92028


 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)  
690-5900

Provider Gender: Female

NPI: 1275542193

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: TU 8AM-5PM

TH-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### FAMILY PRACTICE


#### CHRISTIE, PATRICIA

Provider ID: 299526

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD  
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 451-4700

 After Hours Phone: (760)  
451-4720

Provider Gender: Female

NPI: 1881625531

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### OPTOMETRIST


#### BULLUM, ANTHONY

Provider ID: 290329


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1328 S MISSION RD  
FALLBROOK, CA 92028

 Phone: (760) 451-4730

Fax: (760) 457-4700

 After Hours Phone: (760)  
451-4730

Provider Gender: Male

NPI: 1992773956






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## D. 专家名录



 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PEDIATRICS

#### **ROBINSON, DAISY**

Provider ID: 298311  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
723-6200  
Provider Gender: Female  
NPI: 1659389740  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN








DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-4PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **HEMET**

#### PHYSICIANS ASSISTANT









#### **SMITH, KELLI**

Provider ID: 272953  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 3853 W STETSON AVE STE  
200  
HEMET, CA 92545  
 Phone: (951) 225-6802  
 After Hours Phone: (951)  
225-6802  
Provider Gender: Female  
NPI: 1841771664  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **IMPERIAL BEACH**

#### CERTIFIED NURSE PRACTITIONER

**ALBARRAN-SLOVIN, MELODY**  
Provider ID: 299329  
Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
 949 PALM AVE  
IMPERIAL BEACH, CA  
91932  
 Phone: (619) 429-3733  
Fax: (619) 628-5550  
 After Hours Phone: (619)  
429-3733  
Provider Gender: Female  
NPI: 1740953249  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

**BORRAJERO, OBEL**  
Provider ID: 303242  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 949 PALM AVE  
IMPERIAL BEACH, CA  
91932  
 Phone: (619) 429-3733  
Fax: (619) 628-5550  
 After Hours Phone: (619)  
429-3733  
Provider Gender: Male

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

NPI: 1093280588

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE**


### **PRACTITIONER**


---

#### **CUNNINGHAM, STEPHANIE**

Provider ID: 301310

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1174223655

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\18


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE**


### **PRACTITIONER**


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#### **O'CONNELL, STEFANY**

Provider ID: 296845

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE  
IMPERIAL BEACH, CA  
91932


 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE**


### **PRACTITIONER**


---

#### **POPE, KATILYNN**

Provider ID: 305980

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1174232748

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE**


### **PRACTITIONER**


---

#### **THYGERSEN, ALAYSA**

Provider ID: 297909

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female

NPI: 1760107767

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### FAMILY PRACTICE

#### **SUMMERS-DAY, COURTNEY**

Provider ID: 290977

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

949 PALM AVE  
IMPERIAL BEACH, CA  
91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### INTERNAL MEDICINE

#### **RYAN, DANA**

Provider ID: 298099

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

949 PALM AVE  
IMPERIAL BEACH, CA  
91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1780609990

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-8PM  
TU-W 8:30AM-5PM

TH 8:30AM-8PM

F 8:30AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### REGISTERED PHYSICAL

### THERAPIST

#### **CHENG, BRANDON**

Provider ID: 304530

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 332-4200

Fax: (613) 332-4220

After Hours Phone: (619)  
332-4200

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 7AM-7PM  
F 7AM-5PM

SA 8AM-1PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### REGISTERED PHYSICAL

### THERAPIST

#### **JIMENEZ, ANDREA**

Provider ID: 299890

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126  
IMPERIAL BEACH, CA

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## D. 专家名录

91932  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1407440670  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

**JIMENEZ, ANDREA**  
Provider ID: 301973  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1407440670

☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

**KARANDE, PRACHI**  
Provider ID: 287101  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932  
☎ Phone: (619) 482-3000  
Fax: (619) 482-3001  
🕒 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1699357525  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT

PROVIDER  
🕒 Hours: M-F 7AM-6PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

**NGUYEN, TIA**  
Provider ID: 305015  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932  
☎ Phone: (619) 482-3000  
Fax: (619) 332-4220  
🕒 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1457136269  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-TH 7AM-7PM  
F 7AM-4PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### NGUYEN, TIA

Provider ID: 305016

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 7AM-7PM  
F 7AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

### NOVENCIDO, ANDREW

Provider ID: 301995

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

### NOVENCIDO, ANDREW

Provider ID: 286783

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

### SPARKS, TODD

Provider ID: 301109

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 7AM-7PM


TU 7AM-0PM

W-TH 7AM-7PM

F 7AM-0PM

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## D. 专家名录


 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **SUGGS, SARAH**


Provider ID: 301429  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 482-3000  
Fax: (619) 482-3001


 After Hours Phone: (619)  
482-3000

Provider Gender: Female  
NPI: 1083353650

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### REGISTERED PHYSICAL THERAPIST

#### **SUGGS, SARAH**

Provider ID: 298365  
Board Certified Specialty: No


#### **COMMUNITY CARE IPA LLC**

 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 482-3000  
Fax: (619) 482-3001

 After Hours Phone: (619)  
482-3000

Provider Gender: Female  
NPI: 1083353650

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-7PM


 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **VILLANUEVA, GIOVANNI**

Provider ID: 301531  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

 Phone: (858) 336-0163  
Fax: (619) 332-4220

 After Hours Phone: (858)  
336-0163

Provider Gender: Male

NPI: 1063046878

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 7AM-7PM  
F 7AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

## LA JOLLA


### ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY


#### **HONG, KIMBERLY**

Provider ID: 246312  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346515442

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### ANESTHESIOLOGY


**ALEXANDER, BRENTON**

Provider ID: 242302

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1811366644

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### ANESTHESIOLOGY

**BECERRA SONGOLO, TOSHA**

Provider ID: 300067

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1265938724

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### ANESTHESIOLOGY


**BRUNO, KELLY**

Provider ID: 238904

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891130993

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### ANESTHESIOLOGY


**CURRAN, BRIAN**

Provider ID: 239003

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1710373642

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**

#### **FEJLEH, ASHLEY**

Provider ID: 269503

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female


NPI: 1609353465


Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**


#### **FUNDINGSLAND, BRENT**

Provider ID: 280469

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1831166560

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, SADDLEBACK

MEMORIAL MED CTR, UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **ANESTHESIOLOGY**

#### **HOSALKAR, HETAL**

Provider ID: 243370

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1861556821

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Gujarati,  
Hindi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **ANESTHESIOLOGY**


#### **HYLTON, DIANA**

Provider ID: 241736

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y



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## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **ANESTHESIOLOGY**







#### **MEYER, MEGAN**



*Provider ID: 239608*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1720473044*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY*

*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **ANESTHESIOLOGY**








#### **NGUYEN, QUOC SY**

*Provider ID: 242189*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1871911644*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **ANESTHESIOLOGY**

#### **OKAMOTO, VINCENT**

*Provider ID: 245952*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 9415 CAMPUS POINT DR LA JOLLA, CA 92093  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1952338709*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, ALVARADO HOSPITAL LLC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **ANESTHESIOLOGY**

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## D. 专家名录

### **OSWALD, JESSICA**

Provider ID: 239601

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427315118

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

### **SHAW, SUSANNA**

Provider ID: 255317

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1063685477

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

### **SORIA, CLAIRE**

Provider ID: 243295

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1447516414

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

### **SUYDAM, STEVEN**

Provider ID: 286570

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1386856821

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

MED CTR, SHARP CORONADO  
HOSP AND HEALTHCARE CTR,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO, SCRIPPS GREEN  
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**


**TRIVEDI, SURAJ**

Provider ID: 246750

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699057885

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

**TSUDA, PAIGE**

Provider ID: 271683

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003261595

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **ANESTHESIOLOGY**

**TULLY, JEFFREY**

Provider ID: 283690

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871912493

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UC DAVIS  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **ANESTHESIOLOGY**

**TZENG, ERIC**

Provider ID: 284578

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

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## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801258264

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**

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#### **WANG, MICHELLE**

Provider ID: 286139

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1659802965

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **ANESTHESIOLOGY**

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#### **YODER, ANDREA**

Provider ID: 272805

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1629463104

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**

---

#### **YOUNAN, LAWRENCE**

Provider ID: 240871

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1922432475

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **ANESTHESIOLOGY CRITICAL**

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#### **CARE MEDICINE**

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#### **KRAUSE, MARTIN**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 280540

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1417243239

Provider English Spoken: Y

Provider Language(s)  
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY PAIN MANAGEMENT**

**CASTELLANOS, JOEL**

Provider ID: 243554

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1700296514

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

**KEEN, WILLIAM**

Provider ID: 291303

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8372

Provider Gender: Male

NPI: 1962561571

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

**MIZZELL, ANNA**

Provider ID: 214021

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1851561021

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

**PHREANER, NICHOLAS**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 224864

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1023373040

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

**SHAPIRO, HILARY**

Provider ID: 300000

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1811382815

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

Provider ID: 304136

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

Provider ID: 304141

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

Provider ID: 304140

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273


Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

NPI: 1104129485

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **CERTIFIED ACUPUNCTURIST**

#### **JULIAN, FIDES**

Provider ID: 304134

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **CERTIFIED ACUPUNCTURIST**

#### **JULIAN, FIDES**

Provider ID: 304135

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **CERTIFIED ACUPUNCTURIST**

#### **JULIAN, FIDES**

Provider ID: 304130

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE**


#### **PRACTITIONER**

#### **AGYEMANG, ALBERTA**

Provider ID: 265131

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (858) 657-8000

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## D. 专家名录

Fax: (858) 657-8387

☎ After Hours Phone: (858)  
657-8000

Provider Gender: Female

NPI: 1023400082

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### **AGYEMANG, ALBERTA**

Provider ID: 265130

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
STE 2B

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1023400082

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### **BOUTELLE, AMY**

Provider ID: 243485

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1609117704

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### **BRADY, KATELYN**

Provider ID: 209017

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1952797540

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### **BUENROSTRO, CHRISTINA**

Provider ID: 243717

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR  
STE 200

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1851749253  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CAPOZZI, JENNIFER**  
Provider ID: 241030  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1336258276  
☑ Provider English Spoken: Y  
☑ Provider Language(s)

Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---

**CONNER, PAMELA**  
Provider ID: 299931  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1770558967  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CONNER, PAMELA**  
Provider ID: 299932  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1770558967  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CONNOR, CAROLINE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 279834

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1609081710

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**CZYPULL, MONICA**

Provider ID: 284662

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9850 GENESEE AVE STE  
320  
LA JOLLA, CA 92037

Phone: (858) 554-1212

Fax: (858) 795-1195

After Hours Phone: (858)  
554-1212

Provider Gender: Female

NPI: 1831784842

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**DAVIES, SUMMER**

Provider ID: 253691

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

Phone: (858) 249-6800  
Fax: (858) 657-6420

After Hours Phone: (858)  
249-6800

Provider Gender: Female

NPI: 1679850671

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**DAVIES, SUMMER**

Provider ID: 238922

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 657-7600

After Hours Phone: (858)  
657-7600

Provider Gender: Female

NPI: 1679850671

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N



Accessibility: CONTACT

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## D. 专家名录

### PROVIDER


 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### DE DIOS, SARAH

Provider ID: 300052  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1528632742  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER




 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group


### CERTIFIED NURSE PRACTITIONER

#### DIMAIRA, FRANCESCA


Provider ID: 245580


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1346670718  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER


#### DIMAIRA, FRANCESCA


Provider ID: 245579  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1346670718

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

#### DRISCOLL, KARRIE


Provider ID: 286376  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093  
 Phone: (858) 822-6277  
Fax: (858) 228-1731

 After Hours Phone: (858)  
822-6277

Provider Gender: Female  
NPI: 1396085098

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**


---

**GARTH, MELISSA**

Provider ID: 268992

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1689232977

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**


---

**GARTH, MELISSA**

Provider ID: 268992

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1689232977

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


**GIOVANNETTI, ERIN**

Provider ID: 276002

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1013317767

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


**GOMEZ, LESLIE**

Provider ID: 299469

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093



 Phone: (800) 926-8273

Fax: (888) 539-8781


 After Hours Phone: (800)



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




926-8273  
Provider Gender: Female  
NPI: 1528578713  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER



**GOMEZ, LESLIE**  
Provider ID: 299470  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1528578713  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**GOMEZ, LESLIE**  
Provider ID: 299465  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1528578713


Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**GOMEZ, LESLIE**  
Provider ID: 299464

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1528578713  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N





 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**HANNA, LINDSAY**  
Provider ID: 284967  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1699257907

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## D. 专家名录




 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



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**CERTIFIED NURSE**  
**PRACTITIONER**



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**HARKNESS, RUMIKO**

*Provider ID: 208840*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8910 VILLA LA JOLLA DR  
 STE 200  
 LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1487785093*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Japanese*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*



 *Website: N/A*  
*IPA: UCSD Medical Group*


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**CERTIFIED NURSE**  
**PRACTITIONER**




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**IYER, VICTORIA**

*Provider ID: 265624*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9350 CAMPUS POINT DR  
 STE 2B  
 LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1871738864*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Tagalog*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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**CERTIFIED NURSE**  
**PRACTITIONER**

---


**JONES, CHRISTA**

*Provider ID: 275564*  
*Board Certified Specialty: No*




**UCSD MEDICAL GROUP**

 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (800) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1396371431*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



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**CERTIFIED NURSE**  
**PRACTITIONER**

---

**KORMANIK, PATRICIA**

*Provider ID: 282070*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 3855 HEALTH SCIENCES  
 DR  
 LA JOLLA, CA 92093  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)*

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## D. 专家名录

926-8273  
Provider Gender: Female  
NPI: 1093895047  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**LANE, KIMBERLY**  
Provider ID: 301604  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 9850 GENESEE AVE STE  
440  
LA JOLLA, CA 92037  
 Phone: (858) 453-5944  
Fax: (858) 429-7925  
 After Hours Phone: (858)  
453-5944  
Provider Gender: Female  
NPI: 1457670119  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

**LEE, HEE**  
Provider ID: 274644  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1497275705  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Korean  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**MATTHESS, JANETTE**  
Provider ID: 287644  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1457694549  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

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## D. 专家名录

### **MATTHESS, JANETTE**

Provider ID: 287645

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1457694549

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **MICK, SHARON**

Provider ID: 299650

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1891061966

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **MICK, SHARON**

Provider ID: 299651

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1891061966

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **MICK, SHARON**

Provider ID: 299646

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1891061966

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**MICK, SHARON**

*Provider ID: 299645*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1891061966*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**MOHEBBI, ATHENA**

*Provider ID: 282231*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1952627176*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Farsi*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


**MULVEY, CAOILFHIONN**

*Provider ID: 291420*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 *Phone: (800) 926-8372*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8372*

*Provider Gender: Female*

*NPI: 1184386864*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


**NACOSTE, LAKEISHA**


*Provider ID: 272935*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 *Phone: (858) 822-5210*

 *After Hours Phone: (858)  
822-5210*

*Provider Gender: Female*

*NPI: 1194139634*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*




*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **PAULSON, KERRY**

*Provider ID: 201269*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 *Phone: (619) 543-3000*  
 *After Hours Phone: (619) 543-3000*

*Provider Gender: Female*  
*NPI: 1518363407*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **RALEIGH, DEBORAH**

*Provider ID: 215016*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1689006876*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation:*  
*UNIVERSITY OF CALIFORNIA*  
*IRVINE MED CTR, UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **ROCHE, CHELSEA**

*Provider ID: 270706*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1063040384*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **ROSSI, CATHERINE**

*Provider ID: 291446*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8372*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8372*

*Provider Gender: Female*

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## D. 专家名录

NPI: 1649934126

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

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#### **SRILASAK, MICHELE**

Provider ID: 281855

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1265487326

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **STEVENSON, REHEIA**

Provider ID: 210795

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346696044

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **CERTIFIED NURSE PRACTITIONER**

---


#### **TOPPEN, LAURA**


Provider ID: 215476

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1326563495

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **TOPPEN, LAURA**

Provider ID: 215475

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1326563495

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TREJO, ANA**

Provider ID: 307671

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1033717194

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TREJO, ANA**

Provider ID: 307670

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1033717194

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TREJO, ANA**

Provider ID: 307673

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1033717194

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TRUJILLO, DALE**

Provider ID: 278428

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
STE 2B

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1003104423

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

---


### THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---


### TUCKER, LANIKA


Provider ID: 307658

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1477325181


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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### YEO, ALEXANDRIA

Provider ID: 299942

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1902368319

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED REGISTERED NURSE ANESTHETIST

---


### ALFONSO, ALVIN


Provider ID: 256375

Board Certified Specialty: No

UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952653404

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED REGISTERED NURSE ANESTHETIST

---


### BAYLIS, CHRISTOPHER

Provider ID: 240764

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1174893358

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):



N

 Accessibility: CONTACT

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### CERTIFIED REGISTERED NURSE ANESTHETIST

#### BURROWS, TERENCE

Provider ID: 256695  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273



Provider Gender: Male  
NPI: 1023194560

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A


IPA: UCSD Medical Group


### CERTIFIED REGISTERED NURSE ANESTHETIST

#### DOLLAND, STEVEN

Provider ID: 280553  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1982059044

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: KERN  
MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


### CERTIFIED REGISTERED NURSE ANESTHETIST

#### FERRITER, STACY

Provider ID: 265296  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1780725556

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

### CERTIFIED REGISTERED NURSE ANESTHETIST

#### GARCIA, CALVIN

Provider ID: 217366  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1427419944

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED REGISTERED**


#### **NURSE ANESTHETIST**

**GONZALEZ, LISA**

Provider ID: 299906

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA


IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED REGISTERED**


#### **NURSE ANESTHETIST**

**MARSH, LINDSAY**

Provider ID: 291387

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003556184

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED REGISTERED**


#### **NURSE ANESTHETIST**

**POLIKOWSKI, SAMANTHA**

Provider ID: 291443

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1194134114

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED REGISTERED**


#### **NURSE ANESTHETIST**

**RAMIREZ, NICOLE**

Provider ID: 291403

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487213500

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**


---

#### **SACKS, BRENT**

Provider ID: 278004

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982133591

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**


---

#### **CHOI, NATHALIE**

Provider ID: 301713

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER,

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **GOODWIN, RACHEL**


Provider ID: 210017


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR

STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---


#### **GREAR MANN, MELISSA**


Provider ID: 210051

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


NPI: 1255384475

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


**CERTIFIED REGISTERED  
NURSE MIDWIFE**


---


**GUNTHER, HOPE**

Provider ID: 210040

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)  
657-8745

Provider Gender: Female


NPI: 1285667741


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU 8AM-5PM  
W 8AM-8PM

TH-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


**CERTIFIED REGISTERED  
NURSE MIDWIFE**


---


**HIRSCH, JENNIFER**

Provider ID: 210057

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)  
657-8745

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU 8AM-5PM  
W 8AM-8PM  
TH-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE MIDWIFE**


---


**HIRSCH, JENNIFER**

Provider ID: 210056

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)  
657-8745

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE MIDWIFE**


---

**NATHAN, CARLY**

Provider ID: 301046

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781




 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1235670977





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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **AMANN, CHRISTOPHER**



*Provider ID: 270914*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 *Phone: (858) 657-7000*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (858)*  
*657-7000*  
*Provider Gender: Male*  
*NPI: 1134326895*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, USC KENNETH*  
*NORRIS JR CANCER*  
*HOSPITAL, KECK HOSPITAL*  
*OF USC, USC VERDUGO HILLS*  
*HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**








#### **AUSTIN, ANDREA**

*Provider ID: 269292*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1811289093*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, GROSSMONT*  
*HOSPITAL, Los Angeles*  
*General Medical Center,*  
*TEMECULA VALLEY HOSPITAL*  
*INC*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*

*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **BAGBY, JESSICA**

*Provider ID: 271138*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1093161473*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **BAGBY, JESSICA**

*Provider ID: 271135*

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037

Phone: (858) 249-6800

Fax: (858) 404-9226

After Hours Phone: (858)  
249-6800

Provider Gender: Female

NPI: 1093161473

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### EMERGENCY MEDICINE

**BARRY, JEFFREY**

Provider ID: 271131

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1801207006

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### EMERGENCY MEDICINE

**BELLINGHAUSEN, AMY**

Provider ID: 270335

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1801206354

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### EMERGENCY MEDICINE

**BLACK, NICHOLAS**

Provider ID: 284415

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1154852689

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group

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### EMERGENCY MEDICINE

---


#### CASTELLANO, TIFFANY

Provider ID: 271611

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037


 Phone: (858) 249-6800

Fax: (858) 404-9226

 After Hours Phone: (858)  
249-6800

Provider Gender: Female

NPI: 1063893063

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### EMERGENCY MEDICINE

---


#### CHEN, ALICE

Provider ID: 287427

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### EMERGENCY MEDICINE

---


#### CHEN, ALICE

Provider ID: 287429

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### EMERGENCY MEDICINE


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#### GALUST, HENRIK

Provider ID: 300053

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

Provider Gender: Male



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## D. 专家名录

NPI: 1932696093

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **GOODRICH, ANDREW**

Provider ID: 271625

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Male


NPI: 1245688415

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **GUITTARD, JESSE**

Provider ID: 239880

Board Certified Specialty: No  
UCSD MEDICAL GROUP



 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 657-6400

 After Hours Phone: (858)  
657-6400

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL  
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **HERNANDEZ, CRISTINA**

Provider ID: 242545

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **HERNANDEZ, CRISTINA**

Provider ID: 278988

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1164765046

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **HOGUE, BRENNIA**

Provider ID: 300006

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1043705296

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **HOGUE, BRENNIA**

Provider ID: 301710

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1043705296

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **HORNBEAK, KIRSTEN**

Provider ID: 240023

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1205214442

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **KRESHAK, ALLYSON**

Provider ID: 257564


Board Certified Specialty: No  
BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT




📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录





 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1194758219  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT

### **EMERGENCY MEDICINE**

#### **KUTZ, CRAIG**




Provider ID: 283846  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male

NPI: 1598295925  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**







#### **KUTZ, CRAIG**

Provider ID: 283844  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1598295925  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **LI, JINGHONG**

Provider ID: 255938  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037  
 Phone: (858) 657-7125  
Fax: (858) 657-7107  
 After Hours Phone: (858) 657-7125  
Provider Gender: Female  
NPI: 1619014479  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group

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### EMERGENCY MEDICINE

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#### LI, JINGHONG

Provider ID: 255937  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 657-7125  
Fax: (858) 657-7107

 After Hours Phone: (858)  
657-7125


Provider Gender: Female  
NPI: 1619014479


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### EMERGENCY MEDICINE

---

#### LIOTTA, BENJAMIN


Provider ID: 283150  
Board Certified Specialty: No  
UCSD MEDICAL GROUP


 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1396270278

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Chinese


Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group

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### EMERGENCY MEDICINE

---

#### MCDANIEL, MICHELE

Provider ID: 246900  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female  
NPI: 1366761959

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

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### EMERGENCY MEDICINE


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#### NOSTE, ERIN

Provider ID: 239796  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

 Phone: (858) 249-6800

 After Hours Phone: (858)  
249-6800

Provider Gender: Female  
NPI: 1871732214

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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**








#### **PARK, JAY**

*Provider ID: 285609*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8910 VILLA LA JOLLA DR STE 100  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1366478372*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*




### **EMERGENCY MEDICINE**

#### **PARK, JAY**

*Provider ID: 285608*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1366478372*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **QUENZER, FAITH**

*Provider ID: 243284*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8910 VILLA LA JOLLA DR STE 100  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1295112670*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UNIVERSITY HSP OF SAN DIEGO CO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 8AM-8PM*  
*M-F 8AM-5PM*  
*SA 8AM-8PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

### **EMERGENCY MEDICINE**


#### **RUDOLF, FRANCES**

*Provider ID: 240160*  
*Board Certified Specialty: No*

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## D. 专家名录

### UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 657-7000  
 After Hours Phone: (858)  
657-7000

Provider Gender: Female

NPI: 1821487430

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


#### **SABHA, MAHMOUD**


Provider ID: 240450

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037

 Phone: (858) 249-6800

 After Hours Phone: (858)  
249-6800

Provider Gender: Male

NPI: 1457747883

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 8AM-8PM

M-F 8AM-5PM

SA 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **SELTZER, JUSTIN**

Provider ID: 283135

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1447791843

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **SMITH, CASEY**

Provider ID: 300008

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871099333

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **SUPAT, BENJAMIN**

Provider ID: 299907


Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1376772905

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


#### **WINKLER, GARRET**

Provider ID: 271416

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1336502095

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


#### **YOU, ALAN**

Provider ID: 269938

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1225425697

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **YOU, ALAN**

Provider ID: 269937

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1225425697

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **EMERGENCY MEDICINE**

#### **YU, ELAINE**

Provider ID: 299985

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE A

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **YU, ELAINE**

Provider ID: 301707

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

#### **BOEDER, SCHAFFER**

Provider ID: 255612

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1477808285

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

#### **JUANG, PATRICIA**

Provider ID: 255606

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1265695795

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

---

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

---

#### **KULASA, KRISTEN**

Provider ID: 255623

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 962-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
962-8273

Provider Gender: Female

NPI: 1932324175

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

---

#### **NAGELBERG, JODI**

Provider ID: 287778

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8939 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1720474141

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

---

#### **PETTUS, JEREMY**

Provider ID: 303286

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1225234982

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### **ENDOCRINOLOGY**

### **METABOLISM DIABETES**

---

#### **SANTOS CAVAIOLA, TRICIA**

Provider ID: 256092

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1518163799

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **FAMILY PRACTICE**

---

#### **CHEN, ALICE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 207166  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 MEDICAL CENTER  
DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1265810337

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Chinese

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### FAMILY PRACTICE

#### **CHEN, ALICE**

Provider ID: 207165  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1265810337

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Chinese

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### FAMILY PRACTICE

#### **JOLICOEUR, MEGAN**

Provider ID: 300056  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1114366192

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

#### **LUKACZ, EMILY**

Provider ID: 256953  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)  
657-8745

Provider Gender: Female  
NPI: 1750339446

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

#### **LUKACZ, EMILY**

Provider ID: 256954

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750339446

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **ANAND, GOBIND**

Provider ID: 272836

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (619) 543-2347

Fax: (858) 657-7259

After Hours Phone: (619)  
543-2347

Provider Gender: Male

NPI: 1861626814

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **DAVE, SHRAVAN**

Provider ID: 270449

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
STE 2C

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1588081814

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **DAVE, SHRAVAN**

Provider ID: 270448

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 925-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
925-8273

Provider Gender: Male

NPI: 1588081814

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **FEJLEH, MOHAMMAD**

Provider ID: 271043

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
STE 2C

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1205240959

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### FEJLEH, MOHAMMAD

Provider ID: 271042

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1205240959

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### HASAN, AWS

Provider ID: 299952

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1780047597

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### HASAN, AWS

Provider ID: 299953

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1780047597

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### HOLMER, ARIELA

Provider ID: 273216

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

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## D. 专家名录

926-8273

Provider Gender: Female

NPI: 1083032544

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### SHAH, SHAILJA

Provider ID: 283897

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1073803243

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### SHAH, SHAILJA

Provider ID: 283898

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1073803243

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### TSAI, MATTHEW

Provider ID: 252369

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285051177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### GASTROENTEROLOGY

#### TSAI, MATTHEW

Provider ID: 252368

Board Certified Specialty: No  
UCSD MEDICAL GROUP





9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273



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## D. 专家名录




Provider Gender: Male  
NPI: 1285051177  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### **GASTROENTEROLOGY**

**YOUSSEF, FADY**  
Provider ID: 300025  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1265887723  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):


N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group




### **GASTROENTEROLOGY**




**YOUSSEF, FADY**  
Provider ID: 300023  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1265887723

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **GYNECOLOGIC ONCOLOGY**

**ESKANDER, RAMEZ**  
Provider ID: 282165  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1144486929  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, EARL AND  
LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,  
Providence St Joseph Hospital,  
Providence St Jude Medical  
Center, ORANGE COAST MEM  
MED CTR, FOUNTAIN VALLEY  
REGIONAL HOSP AND MED  
CTR, FOUNTAIN VALLEY  
REGIONAL HOSP AND MED  
CTR, CORONA REGIONAL  
MED CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON,  
UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### **HEMATOLOGY / ONCOLOGY**

#### **ASIMAKOPOULOS, FOTIOS**

Provider ID: 246594

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (858) 822-6100

After Hours Phone: (858)  
822-6100

Provider Gender: Male

NPI: 1518134923

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **HEMATOLOGY / ONCOLOGY**

#### **CHEN, YU-WEI**

Provider ID: 303057

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **HEMATOLOGY / ONCOLOGY**

#### **CHEN, YU-WEI**

Provider ID: 303058

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **HEMATOLOGY / ONCOLOGY**

#### **HAMDAN, AYAD**

Provider ID: 241429

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3960 HEALTH SCIENCES  
DRIVE

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1144431230

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, French

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **HEMATOLOGY / ONCOLOGY**

#### **HEYMAN, BENJAMIN**

Provider ID: 202662

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU-SA 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **HEYMAN, BENJAMIN**

Provider ID: 202664

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **HEYMAN, BENJAMIN**

Provider ID: 202663

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **PARK, SOO**

Provider ID: 257202

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1821351198

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **RICHARDSON, ANGELIQUE**

Provider ID: 215010

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1700120102

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **STEWART, TYLER**

Provider ID: 243920

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699110676

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **VU, PETER**

Provider ID: 272717

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1861810830

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / PATHOLOGY

#### **WANG, HUAN YOU**

Provider ID: 247584

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1689633729

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / PATHOLOGY

#### **WANG, HUAN YOU**

Provider ID: 275792

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1689633729

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### HEPATOLOGY


#### **BARMAN, PRANAB**

Provider ID: 241954

Board Certified Specialty: No  
UCSD MEDICAL GROUP



 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1023301991

 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HEPATOLOGY

#### **BARMAN, PRANAB**


Provider ID: 241952


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR

STE 2C

LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1023301991

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HOSPICE AND PALLIATIVE MEDICINE


#### **RUBENZIK, TAMARA**

Provider ID: 245574

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

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## D. 专家名录

926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **HOSPITALIST MD/DO**

#### **CHILDERS, DIANA**

Provider ID: 275070

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1033128376

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **HOSPITALIST MD/DO**

#### **CHILDERS, DIANA**

Provider ID: 275069

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1033128376

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **HOSPITALIST MD/DO**

#### **FIRESTEIN, CATHERINE**

Provider ID: 275388

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427348382

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **HOSPITALIST MD/DO**








#### **HAMMOND, CHARLES**

Provider ID: 278589

Board Certified Specialty: No  
UCSD MEDICAL GROUP




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## D. 专家名录

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1033641816  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### HOSPITALIST MD/DO





#### **SHINDO, YURI**



Provider ID: 284744  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1700271939

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Japanese  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### HOSPITALIST MD/DO




#### **TONG, ALEXANDER**




Provider ID: 300046  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1356804926  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### INFECTIOUS DISEASE

#### **KUPPALLI, KRUTIKA**

Provider ID: 301057  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1538346317

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, Stanford Health  
Care, STANFORD HEALTH  
CARE TRI-VALLEY  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### INFECTIOUS DISEASE

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## D. 专家名录

### KUPPALLI, KRUTIKA

Provider ID: 301059

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1538346317

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, Stanford Health  
Care, STANFORD HEALTH  
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### INFECTIOUS DISEASE

### RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299947

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1659720555

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### INFECTIOUS DISEASE

### TANG, MICHAEL

Provider ID: 300063

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982018545

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

### BORDIN-WOSK, TALYA

Provider ID: 273984

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (760) 471-9186

Fax: (619) 543-8255

After Hours Phone: (760)  
471-9186

Provider Gender: Female

NPI: 1801184973

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM








Website: N/A

IPA: UCSD Medical Group




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## D. 专家名录

**INTERNAL MEDICINE**





**BORDIN-WOSK, TALYA**  
 Provider ID: 273985  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
 926-8273  
 Provider Gender: Female  
 NPI: 1801184973  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group



**INTERNAL MEDICINE**

**CHENG, GEORGE**  
 Provider ID: 247640  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)



926-8273  
 Provider Gender: Male  
 NPI: 1316174568  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Chinese  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

**INTERNAL MEDICINE**

**DJEKIC, KRISTINA**  
 Provider ID: 286669  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
 926-8273  
 Provider Gender: Female  
 NPI: 1417343732  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

**INTERNAL MEDICINE**

**HOGARTH, MICHAEL**  
 Provider ID: 214385  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
 926-8273  
 Provider Gender: Male  
 NPI: 1225019193  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Portuguese,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UC DAVIS  
 MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE


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**IVANOV, MARGARET**

Provider ID: 272876

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1326427014

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### INTERNAL MEDICINE


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**JABBOUR, MOUSSA**

Provider ID: 256658

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1255741633

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE


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
**KATZ, YISRAEL**

Provider ID: 272937

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1730507872

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### INTERNAL MEDICINE


---


**KVIATKOVSKY, MILLA**

Provider ID: 274002

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (858) 657-7000

 After Hours Phone: (858)  
657-7000

Provider Gender: Female

NPI: 1366855355

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Finnish, French,  
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERNAL MEDICINE

**KVIATKOVSKY, MILLA**

Provider ID: 274004

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1366855355

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Finnish, French,  
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERNAL MEDICINE


**LAGO HERNANDEZ, CARLOS**

Provider ID: 238623

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1558756270

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERNAL MEDICINE

**LAGO HERNANDEZ, CARLOS**

Provider ID: 238624

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1558756270

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERNAL MEDICINE

**LAM, MICHAEL**

Provider ID: 274409

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

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## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1578974259

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **MAJITHIA, AMIT**

Provider ID: 255881

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801091459

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **MARTINEZ, ARMANDO**

Provider ID: 291422

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8372

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8372

Provider Gender: Male

NPI: 1598261091

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **NOKES, BRANDON**

Provider ID: 287581

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1487040051

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **POTOK, OLIVIA**

Provider ID: 272707

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1073951323

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **SEBASKY, MEGHAN**

Provider ID: 273963

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (619) 471-9186

☎ After Hours Phone: (619) 471-9186

Provider Gender: Female

NPI: 1538351408

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **SEBASKY, MEGHAN**

Provider ID: 273964

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538351408

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **SMITH, CHELSEY**

Provider ID: 239921

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
STE 2B

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1013264506

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **TAYLOR, DAVID**

Provider ID: 274470

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033572995

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **WANG, ANGELA**

Provider ID: 259536

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730133976

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **YADLAPATI, RENA**

Provider ID: 238587

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1548597784

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **YADLAPATI, RENA**

Provider ID: 238586

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1548597784

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

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## D. 专家名录

### **YANG, JENNY**

Provider ID: 283025

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346636453

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND  
HEALTHCARE CTR, UCSD

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

### **ZHANG, SHERRY**

Provider ID: 272658

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1588198147

Provider English Spoken: Y

Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N  
Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

### **CRITICAL CARE MEDICINE**

### **ALOTAIBI, MONA**

Provider ID: 271480

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174933915

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

### **CRITICAL CARE MEDICINE**

### **BOROK, ZEA**

Provider ID: 284703

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-5273

Provider Gender: Female

NPI: 1750317251




Provider English Spoken: Y

Provider Language(s)  
Spoken: Hebrew

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## D. 专家名录




*Cultural Competency: N*  
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### INTERNAL MEDICINE CRITICAL CARE MEDICINE





#### **ODISH, MAZEN**




*Provider ID: 271468*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1992141428*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### INTERNAL MEDICINE CRITICAL CARE MEDICINE






#### **TRAN, LINH**

*Provider ID: 271938*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1851682728*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### INTERVENTIONAL CARDIOLOGY

#### **AL KHIAMI, BELAL**


*Provider ID: 275993*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 *9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037*  
 *Phone: (858) 657-8530*  
 *After Hours Phone: (858) 657-8530*  
*Provider Gender: Male*  
*NPI: 1861623506*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): IPA: UCSD Medical Group  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERVENTIONAL CARDIOLOGY

#### **CRUZ RODRIGUEZ, JOSE**

Provider ID: 300062

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1457770240

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL, EL  
CENTRO REGIONAL MEDICAL  
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

### INTERVENTIONAL CARDIOLOGY


#### **DAMANI, SAMIR**

Provider ID: 303097

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 9850 GENESEE AVE STE  
650

LA JOLLA, CA 92037

 Phone: (858) 800-2480

Fax: (858) 216-1908

 After Hours Phone: (858)  
800-2480

Provider Gender: Male

NPI: 1457379372

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY

#### **GOVEA, ALAYN**

Provider ID: 300030

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1972997104

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

LAKEWOOD REGIONAL MED  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### INTERVENTIONAL CARDIOLOGY

#### **TAUB, PAM**


Provider ID: 277681

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female

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## D. 专家名录

NPI: 1346355161

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERVENTIONAL CARDIOLOGY

#### **TAUB, PAM**

Provider ID: 277682

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


### INTERVENTIONAL CARDIOLOGY

#### **WETTERSTEN, NICHOLAS**

Provider ID: 210604

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037


 Phone: (858) 657-8530

Fax: (858) 657-8814

 After Hours Phone: (858)  
657-8530

Provider Gender: Male

NPI: 1063701068


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### MATERNAL AND FETAL MEDICINE


#### **BALLAS, JERASIMOS**

Provider ID: 209561

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871767384

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, EISENHOWER  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### MATERNAL AND FETAL

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## D. 专家名录

### MEDICINE

#### **EMERUWA, UKACHI**

Provider ID: 300009

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1245627421

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NPI: 1770532707

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

#### **MELBER, DORA**

Provider ID: 240599

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hungarian,

### MATERNAL AND FETAL MEDICINE

#### **HULL, ANDREW**

Provider ID: 209482

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)  
657-8745

Provider Gender: Male

NPI: 1902862121

### MATERNAL AND FETAL MEDICINE

#### **LAURENT, LOUISE**

Provider ID: 208639

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037




Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273





Provider Gender: Female




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## D. 专家名录






Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR, RADY CHILDRENS  
 HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network, UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**MOORE, THOMAS**  
 Provider ID: 208642  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (858) 657-8745  
 After Hours Phone: (858)  
 657-8745  
 Provider Gender: Male  
 NPI: 1184682379  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, SCRIPPS  
 MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**WOELKERS, DOUGLAS**  
 Provider ID: 209383  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (858) 657-7200  
 After Hours Phone: (858)  
 657-7200  
 Provider Gender: Male  
 NPI: 1013965748  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS, PALOMAR  
 MEDICAL CENTER, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL

CTR, UCSD MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**WOLF, RICHARD**  
 Provider ID: 209252  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
 LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
 926-8273  
 Provider Gender: Male  
 NPI: 1497713846  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL,  
 SCRIPPS MERCY HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS, PALOMAR  
 MEDICAL CENTER, UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

THORNTON, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### NEONATAL / PERINATAL MEDICINE


**BAI-TONG, SHIYU**

Provider ID: 283287

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1528454188

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEONATAL / PERINATAL MEDICINE

**DEL ROSARIO, PAMELA**

Provider ID: 295001

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1952691941

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


### NEONATAL / PERINATAL MEDICINE

**HIETALATI, SAMANTHA**

Provider ID: 294252

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1245617489

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

**MARC-AURELE, KRISHELLE**

Provider ID: 206207

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## D. 专家名录

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

**MARC-AURELE, KRISHELLE**

Provider ID: 206209

Board Certified Specialty: No

**RADY CHILDRENS HEALTH NETWORK**

9888 GENESEE AVE  
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)  
626-4123

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

**MATOBA, NANA**

Provider ID: 299893

Board Certified Specialty: No

**RADY CHILDRENS HEALTH**

**NETWORK**

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

**MATOBA, NANA**

Provider ID: 297977

Board Certified Specialty: No


**RADY CHILDRENS HEALTH  
NETWORK**

9300 CAMPUS POINT DR  
STE 8

LA JOLLA, CA 92037

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## D. 专家名录


 Phone: (858) 657-7000


Fax: (858) 249-5839

 After Hours Phone: (858) 657-7000

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEONATAL / PERINATAL MEDICINE

#### **MESTAN, KAREN**

Provider ID: 285931

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800  
Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1942253356

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEONATAL / PERINATAL MEDICINE


#### **NYMAN, KATHERINE**

Provider ID: 301824

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9888 GENESEE AVE  
LA JOLLA, CA 92037

 Phone: (858) 626-4123  
Fax: (760) 633-7998

 After Hours Phone: (858)  
626-4123

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEONATAL / PERINATAL MEDICINE

#### **RAMOS, CARLOS**

Provider ID: 206062

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800  
Fax: (619) 543-3812

 After Hours Phone: (858)  
249-5800

Provider Gender: Male

NPI: 1205047545

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, EL CENTRO  
REGIONAL MEDICAL CENTER,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,

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## D. 专家名录

RADY CHILDRENS HOSPITAL  
SAN DIEGO, UCSD LA JOLLA  
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEONATAL / PERINATAL MEDICINE

#### **SAJTI, ENIKO**

Provider ID: 206170

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1649433103

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF


BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE


#### **SAUER, CHARLES**

Provider ID: 303908

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9300 CAMPUS POINT DR  
FL 8

LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
PALOMAR MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PALOMAR

HEALTH, SCRIPPS MEMORIAL  
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE


#### **SAUER, CHARLES**

Provider ID: 303907


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 9888 GENESEE AVE

LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)  
626-4123

Provider Gender: Male

NPI: 1538388988




 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

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## D. 专家名录





CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### NEUROLOGY





#### BEVINS, ELIZABETH




Provider ID: 277726  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1013395151  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY




#### COUGHLIN, DAVID


Provider ID: 240950  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1740543784  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

#### IRAGUIMADOZ, VICENTE

Provider ID: 246701  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 657-8540  
 After Hours Phone: (858) 657-8540  
Provider Gender: Male  
NPI: 1053326710

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

#### LEE, DAVID

Provider ID: 246264  
Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE LLB  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)  
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

#### LEGER, GABRIEL

Provider ID: 247609

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (858) 657-8540

After Hours Phone: (858)  
657-8540

Provider Gender: Male

NPI: 1720367899

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

#### QAYOUMI, WALI

Provider ID: 284369

Board Certified Specialty: No

UCSD MEDICAL GROUP

9500 GILMAN DR STE  
2069

LA JOLLA, CA 92093

Phone: (858) 822-5881

Fax: (888) 539-8781

After Hours Phone: (858)  
822-5881

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

#### QAYOUMI, WALI

Provider ID: 284371

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE LLB

LA JOLLA, CA 92037

Phone: (619) 284-3746

Fax: (888) 579-8781

After Hours Phone: (619)  
284-3746

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY


#### **SCHULTE, JESSICA**

Provider ID: 284819

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (858) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1467870576

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF  
MEDICAL CENTER AT MOUNT  
ZION, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### NUCLEAR MEDICINE

#### **SHARIF TABRIZI, AHMAD**

Provider ID: 300029

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1053727313

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Providence  
St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OBSTETRICS / GYNECOLOGY


#### **BINDER, PRATIBHA**

Provider ID: 273225

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### OBSTETRICS / GYNECOLOGY


#### **BONDRE, IOANA**

Provider ID: 284311

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1326579863

 Provider English Spoken: Y


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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OBSTETRICS / GYNECOLOGY**

#### **BONDRE, IOANA**

*Provider ID: 284310*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Female*

*NPI: 1326579863*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*


*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL):* *Board Certified Specialty: No*  
N

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OBSTETRICS / GYNECOLOGY**

#### **DELCORE, LAURA**

*Provider ID: 291324*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*MEMORIAL HOSPITAL*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT*  
*PROVIDER*

 *Website: N/A*


*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**

#### **DELCORE, LAURA**

*Provider ID: 291323*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Female*

*NPI: 1790128759*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT*  
*PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OBSTETRICS / GYNECOLOGY**

#### **DRIEBE, AMY**

*Provider ID: 291335*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Female*

*NPI: 1730507567*



 *Provider English Spoken: Y*

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## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**






**DRIEBE, AMY**  
*Provider ID: 291334*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)  
926-8273*  
*Provider Gender: Female*  
*NPI: 1730507567*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**




**GUPTA, PRATIMA**  
*Provider ID: 257546*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)  
926-8273*  
*Provider Gender: Female*  
*NPI: 1891749842*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Hindi, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**  
*Provider ID: 278916*  
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 923-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)  
923-8273*  
*Provider Gender: Male*  
*NPI: 1457662868*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**


**HARVEY, SCOTT**  
*Provider ID: 278918*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)  
926-8273*  
*Provider Gender: Male*

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## D. 专家名录

NPI: 1457662868

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **HOANG, MAI**

Provider ID: 208295  
Board Certified Specialty: No  
UCSD MEDICAL GROUP




 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1104143593

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



### **OBSTETRICS / GYNECOLOGY**

#### **HOM-TEDLA, MARIANNE**

Provider ID: 242752  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273



Provider Gender: Female  
NPI: 1972047397

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**



#### **KLEIN, DAVID**

Provider ID: 271559  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1780073635



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **KLEIN, DAVID**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 271558

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **LAMALE-SMITH, LEAH**

Provider ID: 286230

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

Provider ID: 200964

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

Provider ID: 303062

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **OBSTETRICS / GYNECOLOGY**

#### **MEADOWS, AUDRA**

Provider ID: 285740

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **OBSTETRICS / GYNECOLOGY**

#### **MEADOWS, AUDRA**

Provider ID: 285739

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 657-8745

Fax: (888) 539-8781

 After Hours Phone: (858)  
657-8745

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **OBSTETRICS / GYNECOLOGY**

#### **MELENDEZ, ARIANA**

Provider ID: 299920

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295232973


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299977

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1447530696


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

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## D. 专家名录

### PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299976  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **RIVAS, RENEE**

Provider ID: 284295  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **RIVAS, RENEE**

Provider ID: 284296

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE  
340

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

#### **RIVAS, RENEE**

Provider ID: 284297

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes




Min/Max Age: 16\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。










## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**


#### **SUYAMA, JULIE**


*Provider ID: 284289*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1306372800*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**

#### **THOMSON, SAMANTHA**


*Provider ID: 285175*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*



 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1689013468*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*


*IPA: UCSD Medical Group*

### **OBSTETRICS / GYNECOLOGY**

#### **THOMSON, SAMANTHA**


*Provider ID: 285173*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*



*Provider Gender: Female*  
*NPI: 1689013468*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*


*IPA: UCSD Medical Group*

### **OCCUPATIONAL THERAPIST**

#### **AMARAL, MARGARET**

*Provider ID: 258303*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037

 *Phone: (858) 657-6879*  
*Fax: (858) 657-6873*

 *After Hours Phone: (858) 657-6879*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 1689874521

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **COLLINS, RESENIA**

Provider ID: 258356

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037

☎ Phone: (858) 657-6879

Fax: (858) 657-6873

📞 After Hours Phone: (858)  
657-6879

Provider Gender: Female

NPI: 1184936718

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **MUNCADA, CAESAR**

Provider ID: 288724

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1790268100

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **SMITH, EMILY**

Provider ID: 258537

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (855) 543-0333

Fax: (858) 657-6873

📞 After Hours Phone: (855)  
543-0333

Provider Gender: Female

NPI: 1417337403

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **SOROKIN, LISA**

Provider ID: 258362

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
STE LLD

LA JOLLA, CA 92037

☎ Phone: (858) 657-6879

Fax: (858) 657-6873

📞 After Hours Phone: (858)  
657-6879

Provider Gender: Female

NPI: 1336445063


☐ Provider English Spoken: Y


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## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OPHTHALMOLOGY**

#### **BAXTER, SALLY**

Provider ID: 272787

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (858) 534-6290

Fax: (888) 539-8781

 After Hours Phone: (858)  
534-6290

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-5PM

SA 7:45AM-2PM

 Website: N/A

IPA: UCSD Medical Group


### **OPHTHALMOLOGY**

#### **BEAZER, ALEX**

Provider ID: 272802

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1942662168

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **CHIU, STEPHAN**


Provider ID: 297586

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

 Phone: (858) 457-3010


Fax: (858) 457-0028

 After Hours Phone: (858)  
457-3010

Provider Gender: Male

NPI: 1053846956

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, SCRIPPS MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### **OPHTHALMOLOGY**

#### **MOVAGHAR, MANSOOR**

Provider ID: 215055

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

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## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1497792220

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

### OPHTHALMOLOGY

#### **PUIG LLANO, MANUEL**

Provider ID: 299965

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427102979

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: French, German, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OPHTHALMOLOGY

#### **RAHMATNEJAD, KAMRAN**

Provider ID: 300039

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1699268292

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OPHTHALMOLOGY

#### **RAHMATNEJAD, KAMRAN**

Provider ID: 300041

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1699268292

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OPHTHALMOLOGY

#### **SATTERFIELD, KELLIE**

Provider ID: 305303

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 9834 GENESEE AVE STE  
200

LA JOLLA, CA 92037

☎ Phone: (858) 457-3050

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Fax: (858) 457-0851

☎ After Hours Phone: (858) 457-3050

Provider Gender: Female

NPI: 1629509336

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

#### **SCHONBACH, ETIENNE**

Provider ID: 284432

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1073040580

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 305309

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 9834 GENESEE AVE STE  
200

LA JOLLA, CA 92037

☎ Phone: (858) 457-3050

Fax: (858) 457-0851

☎ After Hours Phone: (858) 457-3050

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 299935

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 299937

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### OPHTHALMOLOGY

#### **SONG, DELU**

Provider ID: 284425

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1437689536

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### OPHTHALMOLOGY

#### **TOPILOW, NICOLE**

Provider ID: 284348

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1215468376

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### OPTOMETRIST

#### **AOTO, KIM**

Provider ID: 296798

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

☎ After Hours Phone: (800)  
898-2020

Provider Gender: Female

NPI: 1780935650

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M 9AM-5PM

TU 8:30AM-4:30PM

W 7:30AM-4:15PM

TH 9:30AM-5PM

F 8:30AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### **HOO, PAMELA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 269621

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 822-4438

After Hours Phone: (858)  
534-6290

Provider Gender: Female

NPI: 1275566010

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### OPTOMETRIST

**JOMOC, CAITLIN**

Provider ID: 299914

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OPTOMETRIST

**JOMOC, CAITLIN**

Provider ID: 299915

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OPTOMETRIST

**KIM, PHILIP**

Provider ID: 287909

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8372

Provider Gender: Male

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### OPTOMETRIST

**MCCLEAN, ESMERALDA**

Provider ID: 269907

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 534-8293


After Hours Phone: (858)  
534-6290

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 1962817981

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### OPTOMETRIST


---

**VO, ANDREW**

Provider ID: 304148

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1790291565

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OPTOMETRIST


---

**VO, ANDREW**

Provider ID: 201311

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (858) 534-6290

 After Hours Phone: (858)  
534-6290

Provider Gender: Male

NPI: 1790291565

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### OPTOMETRIST


---

**YU, CAROL**

Provider ID: 301681

Board Certified Specialty: No

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female


NPI: 1639697451

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OPTOMETRIST


---

**YU, CAROL**

Provider ID: 301682

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639697451

 Provider English Spoken: Y  
Cultural Competency: N




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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## D. 专家名录

American Sign Language (ASL):  9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

IPA: UCSD Medical Group


### **OPTOMETRIST**

#### **YU, CAROL**

Provider ID: 258078

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639697451


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): **BRUMUND, KEVIN**  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **BRUMUND, KEVIN**

Provider ID: 299637

Board Certified Specialty: No  
UCSD MEDICAL GROUP

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **OTOLARYNGOLOGY**

#### **BRUMUND, KEVIN**

Provider ID: 299633

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **BRUMUND, KEVIN**

Provider ID: 299636

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY





THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL):  9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **OTOLARYNGOLOGY**

#### **CALIFANO, JOSEPH**

Provider ID: 299463  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273


Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**


#### **CALIFANO, JOSEPH**

Provider ID: 299460  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **CALIFANO, JOSEPH**

Provider ID: 299459  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A

IPA: UCSD Medical Group


### **OTOLARYNGOLOGY**

#### **CALIFANO, JOSEPH**

Provider ID: 299458  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093


 Phone: (858) 822-6197

Fax: (858) 822-6198

 After Hours Phone: (858)  
822-6197


Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **COFFEY, CHARLES**

Provider ID: 299584  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES

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## D. 专家名录

DR  
LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1932297330  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**COFFEY, CHARLES**  
Provider ID: 299585  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1932297330  
🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**COFFEY, CHARLES**  
Provider ID: 299581  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1932297330  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**COFFEY, CHARLES**  
Provider ID: 299580  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1932297330  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**DECONDE, ADAM**  
Provider ID: 299564  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 3855 HEALTH SCIENCES  
DR

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## D. 专家名录

---

LA JOLLA, CA 92093  
☎ Phone: (858) 657-8590  
📞 After Hours Phone: (858) 657-8590  
Provider Gender: Male  
NPI: 1588988919  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

**DECONDE, ADAM**  
Provider ID: 299570  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📄 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1588988919  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

**DECONDE, ADAM**  
Provider ID: 299565  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📄 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (858) 657-8590  
📞 After Hours Phone: (858) 657-8590  
Provider Gender: Male  
NPI: 1588988919

📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

**DECONDE, ADAM**

Provider ID: 299566  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📄 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1588988919  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

**FRIEDMAN, RICK**  
Provider ID: 299533  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📄 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 1982708558

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIH


HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP  
OF LOS ANGELES, SOUTH  
COAST GLOBAL MEDICAL  
CENTER INC, ANAHEIM  
GLOBAL MEDICAL CENTER,  
ORANGE COUNTY GLOBAL  
MEDICAL CENTER INC,  
CHAPMAN GLOBAL MEDICAL  
CENTER INC, UCSD LA JOLLA  
JOHN SALLY THORNTON,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **OTOLARYNGOLOGY**

**FRIEDMAN, RICK**

Provider ID: 299534

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PIH  
HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP  
OF LOS ANGELES, SOUTH  
COAST GLOBAL MEDICAL  
CENTER INC, ANAHEIM  
GLOBAL MEDICAL CENTER,  
ORANGE COUNTY GLOBAL  
MEDICAL CENTER INC,  
CHAPMAN GLOBAL MEDICAL  
CENTER INC, UCSD LA JOLLA  
JOHN SALLY THORNTON,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**


**FRIEDMAN, RICK**

Provider ID: 299529


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982708558


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PIH  
HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP  
OF LOS ANGELES, SOUTH  
COAST GLOBAL MEDICAL  
CENTER INC, ANAHEIM  
GLOBAL MEDICAL CENTER,  
ORANGE COUNTY GLOBAL  
MEDICAL CENTER INC,  
CHAPMAN GLOBAL MEDICAL  
CENTER INC, UCSD LA JOLLA  
JOHN SALLY THORNTON,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**

**FRIEDMAN, RICK**

Provider ID: 299528

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,

ORANGE COUNTY GLOBAL

MEDICAL CENTER INC,

CHAPMAN GLOBAL MEDICAL

CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**GILANI, SAPIDEH**

Provider ID: 299562

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003825571

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**GILANI, SAPIDEH**

Provider ID: 299563

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003825571

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**GILANI, SAPIDEH**

Provider ID: 299558

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003825571

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY


**GILANI, SAPIDEH**

Provider ID: 299557

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

**GREENE, JACQUELINE**


Provider ID: 272958

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
STE LLA

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY


**GREENE, JACQUELINE**

Provider ID: 298395

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY


**GREENE, JACQUELINE**

Provider ID: 298394

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group


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### **OTOLARYNGOLOGY**

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#### **GREENE, JACQUELINE**

Provider ID: 298398  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**


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#### **HARRIS, JEFFREY**

Provider ID: 299577

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**


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#### **HARRIS, JEFFREY**

Provider ID: 299578

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**


---

#### **HARRIS, JEFFREY**

Provider ID: 299574

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

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## D. 专家名录

### HARRIS, JEFFREY

Provider ID: 299573

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1417988783

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

### HOM, DAVID

Provider ID: 299516

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1659305027

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

### HOM, DAVID

Provider ID: 299517

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1659305027

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

### HOM, DAVID

Provider ID: 299513

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1659305027

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

<b>OTOLARYNGOLOGY</b>	
<b>HOM, DAVID</b> Provider ID: 299512 Board Certified Specialty: No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1659305027 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	<b>KARI, ELINA</b> Provider ID: 294828 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 9350 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (858) 857-8590 After Hours Phone: (858) 857-8590 Provider Gender: Female NPI: 1780860536 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation:
<b>HUSSEMAN, JACOB</b> Provider ID: 301051 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (800) 926-8273	<b>KARI, ELINA</b> Provider ID: 294828 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 9350 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (858) 857-8590 After Hours Phone: (858) 857-8590 Provider Gender: Female NPI: 1780860536 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation:
	<b>KARI, ELINA</b> Provider ID: 299447 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1780860536 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group





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## D. 专家名录

ANGELES, PIH HEALTH  
HOSPITAL - WHITTIER, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### OTOLARYNGOLOGY





#### **KARI, ELINA**




Provider ID: 299448  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1780860536  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
CHILDRENS HOSP OF LOS  
ANGELES, PIH HEALTH  
HOSPITAL - WHITTIER, UCSD  
LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### OTOLARYNGOLOGY

#### **KARI, ELINA**

Provider ID: 299442  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 857-8590  
 After Hours Phone: (858)  
857-8590  
Provider Gender: Female  
NPI: 1780860536  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
CHILDRENS HOSP OF LOS  
ANGELES, PIH HEALTH  
HOSPITAL - WHITTIER, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### OTOLARYNGOLOGY



#### **KARI, ELINA**

Provider ID: 299444  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1780860536  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
CHILDRENS HOSP OF LOS  
ANGELES, PIH HEALTH  
HOSPITAL - WHITTIER, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

N


 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

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### **OTOLARYNGOLOGY**


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#### **MAGIT, ANTHONY**

*Provider ID: 299484*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*



*Provider Gender: Male*

*NPI: 1891858379*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

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### **OTOLARYNGOLOGY**

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#### **MAGIT, ANTHONY**

*Provider ID: 299479*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*



*Provider Gender: Male*

*NPI: 1891858379*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

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### **OTOLARYNGOLOGY**

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#### **MAGIT, ANTHONY**

*Provider ID: 299478*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*



 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1891858379*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

N



 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

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### **OTOLARYNGOLOGY**

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#### **MAGIT, ANTHONY**

*Provider ID: 299483*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 3855 HEALTH SCIENCES DR  
LA JOLLA, CA 92093  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*



*NPI: 1891858379*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*

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## D. 专家名录

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health Network, UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **MATSUOKA, AKIHIRO**




Provider ID: 299594  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1669630653  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **MATSUOKA, AKIHIRO**




Provider ID: 299589


Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1669630653



 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **MATSUOKA, AKIHIRO**

Provider ID: 299588  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1669630653


 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **MATSUOKA, AKIHIRO**

Provider ID: 299593  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1669630653

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **NGUYEN, QUYEN**

Provider ID: 299609  
Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **NGUYEN, QUYEN**

Provider ID: 299604

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 657-8590

After Hours Phone: (858)  
657-8590

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **NGUYEN, QUYEN**

Provider ID: 299605

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **NGUYEN, QUYEN**

Provider ID: 299608

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

---

#### VAHABZADEH-HAGH, ANDREW

Provider ID: 299504

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 822-6197

After Hours Phone: (858)  
822-6197

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RONALD  
REAGAN UCLA MED CTR,  
SANTA MONICA UCLA MED  
CTR, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

---

#### VAHABZADEH-HAGH, ANDREW

Provider ID: 299510

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RONALD  
REAGAN UCLA MED CTR,  
SANTA MONICA UCLA MED  
CTR, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

---

#### VAHABZADEH-HAGH, ANDREW

Provider ID: 299506

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RONALD  
REAGAN UCLA MED CTR,  
SANTA MONICA UCLA MED  
CTR, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

---

#### VAHABZADEH-HAGH, ANDREW

Provider ID: 299505

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1346506920

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **WATSON, DEBORAH**

*Provider ID: 299644*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346270816*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **WATSON, DEBORAH**

*Provider ID: 299638*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (858) 657-8590*

*Fax: (858) 657-8682*

 *After Hours Phone: (858) 657-8590*

*Provider Gender: Female*

*NPI: 1346270816*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **OTOLARYNGOLOGY**


#### **WATSON, DEBORAH**

*Provider ID: 299640*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346270816*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **OTOLARYNGOLOGY**


#### **WATSON, DEBORAH**

*Provider ID: 299643*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*


*Provider Gender: Female*

*NPI: 1346270816*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**


#### **WEISSBROD, PHILIP**

*Provider ID: 299612*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 3855 HEALTH SCIENCES DR  
LA JOLLA, CA 92093

 *Phone: (858) 657-8590*

 *After Hours Phone: (858) 657-8590*

*Provider Gender: Male*

*NPI: 1366590853*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*IPA: UCSD Medical Group*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **WEISSBROD, PHILIP**

*Provider ID: 299616*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1366590853*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **OTOLARYNGOLOGY**


#### **WEISSBROD, PHILIP**


*Provider ID: 299611*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

 *Phone: (858) 657-8590*

 *After Hours Phone: (858) 657-8590*

*Provider Gender: Male*

*NPI: 1366590853*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **WEISSBROD, PHILIP**

*Provider ID: 299613*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1366590853*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD*

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## D. 专家名录

MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**

---


#### **YAN, CAROL**

Provider ID: 298415

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**


---

#### **YAN, CAROL**

Provider ID: 298416

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

---

### **OTOLARYNGOLOGY**

---


#### **YAN, CAROL**


Provider ID: 242138

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE LLA

LA JOLLA, CA 92037


 Phone: (858) 657-8590

 After Hours Phone: (858)  
657-8590

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**

---

#### **YAN, CAROL**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 298411  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1619237260

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC**

#### **FADARE, OLUWOLE**

Provider ID: 275706

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1619955804

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC**

#### **HANSEN, LAWRENCE**

Provider ID: 275768

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1760407498

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC**

#### **PARAST, MANA**

Provider ID: 275889

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1629163100

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### PATHOLOGY ANATOMIC

#### **PATEL, CHARMI**

*Provider ID: 259112*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*


*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1730389362*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Gujarati, Hindi*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


*IPA: UCSD Medical Group*


### PATHOLOGY ANATOMIC

#### **WONG, RICHARD**

*Provider ID: 275815*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1275084295*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY*

*THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### PATHOLOGY ANATOMIC


#### CLINICAL

#### **AISAGBONHI, OMONIGHO**

*Provider ID: 275750*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1043571045*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY*

*THORNTON, SCRIPPS*

*MEMORIAL HOSPITAL,*

*SCRIPPS MERCY HOSPITAL,*

*SCRIPPS MERCY HOSPITAL*

*CHULA VISTA, SCRIPPS*

*MEMORIAL HOSPITAL*

*ENCINITAS, SCRIPPS GREEN*

*HOSPITAL, SCRIPPS GREEN*

*HOSPITAL*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### PATHOLOGY ANATOMIC

#### CLINICAL

#### **AISAGBONHI, OMONIGHO**

*Provider ID: 201304*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

*Board Certified Specialty: No*  
**UCSD MEDICAL GROUP**

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1043571045

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

**PATHOLOGY ANATOMIC**  
**CLINICAL**

**ALLEN, ELIZABETH**

Provider ID: 275757

*Board Certified Specialty: No*  
**UCSD MEDICAL GROUP**

📍 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174814065

🗣 Provider English Spoken: Y

🗣 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

**PATHOLOGY ANATOMIC**  
**CLINICAL**

**BROOME, HELEN**

Provider ID: 275722

*Board Certified Specialty: No*  
**UCSD MEDICAL GROUP**

📍 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1184674145

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

**PATHOLOGY ANATOMIC**  
**CLINICAL**

**BUI, JACK**

Provider ID: 275746

*Board Certified Specialty: No*

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**UCSD MEDICAL GROUP**  
9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1942529821  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC** **CLINICAL**

**DON, MICHELLE**  
Provider ID: 275816  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1205288396  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC** **CLINICAL**

**DON, MICHELLE**  
Provider ID: 247149  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (858) 249-4410  
After Hours Phone: (858) 249-4410  
Provider Gender: Female  
NPI: 1205288396  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group



### **PATHOLOGY ANATOMIC** **CLINICAL**

**ELKIND, JAE**  
Provider ID: 284903  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1922497700  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC CLINICAL

#### HU, JINGJING

Provider ID: 243965  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1538574744



Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC CLINICAL

#### HU, JINGJING

Provider ID: 243966  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1538574744



Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### PATHOLOGY ANATOMIC CLINICAL

#### ROMA, ANDRES

Provider ID: 275827  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1295912657



Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC CLINICAL

#### SHABAIK, AHMED

Provider ID: 275782  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781




 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1679521579





Provider English Spoken: Y  
 Provider Language(s)




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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



### PATHOLOGY ANATOMIC CLINICAL

**VAVINSKAYA, VERA**  
Provider ID: 275840  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1174757181  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR



Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC CLINICAL

**ZARE, SOMAYE**  
Provider ID: 275814  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1700334802  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC CLINICAL

**ZARE, SOMAYE**  
Provider ID: 203172  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1700334802  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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## D. 专家名录

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### **PATHOLOGY ANATOMIC** **CLINICAL**


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#### **ZHANG, HAIYAN**

Provider ID: 203176

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **PATHOLOGY ANATOMIC** **CLINICAL**


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#### **ZHANG, HAIYAN**

Provider ID: 275841

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN


HOSPITAL, SCRIPPS GREEN  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **PATHOLOGY CLINICAL**


---

#### **KELNER, MICHAEL**

Provider ID: 275735

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1174679849

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR, EL CENTRO REGIONAL  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **PATHOLOGY CLINICAL**

#### **LE DZUNG, THE**

Provider ID: 275733

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770526931

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **AINSWORTH, DELISSA**

Provider ID: 243366

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750734893

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **ALBRIGHT, KELSEY**

Provider ID: 284764

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1235653148

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **ALLERS, JENNA**

Provider ID: 301037

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730605486

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SALINAS  
VALLEY MEMORIAL HOSP

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### PHYSICIANS ASSISTANT

#### ARMEEN, GARY

Provider ID: 247036

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### PHYSICIANS ASSISTANT

#### BOYD, LISA

Provider ID: 217650

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### PHYSICIANS ASSISTANT


#### BRUECKNER, TAMMIE

Provider ID: 255557

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### PHYSICIANS ASSISTANT

#### CHERRY, REENA

Provider ID: 269494

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1689729683

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

#### CHERRY, REENA


Provider ID: 243349


Board Certified Specialty: No

UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689729683

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


#### COOKISH, DAVID

Provider ID: 286591

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1215338884

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


#### CRIFE, TAYLOR

Provider ID: 210983

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1659827087

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


#### DEMASCO, MICHAEL

Provider ID: 278969

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1467926295

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON


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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  8939 VILLA LA JOLLA DR  
STE 110

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**


#### **DEMOOR, PATRICIA**


Provider ID: 212879

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1477721702


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **HASEGAWA, CHRIS**

Provider ID: 247205


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR  
STE 110

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**


#### **HIGGINS, JOSHUA**


Provider ID: 287136

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **HIGGINS, JOSHUA**


Provider ID: 287135


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

---


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  9350 CAMPUS POINT DR  
STE LLA

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


Provider ID: 287450

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE LLA  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):  N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


HUNTER, JACOB



Provider ID: 298432

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


HUNTER, JACOB


Provider ID: 298429

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765

---

### PHYSICIANS ASSISTANT


HUNTER, JACOB



Provider ID: 298431

Board Certified Specialty: No

UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

HUNTER, JACOB

---

### PHYSICIANS ASSISTANT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### HUNTER, JACOB

Provider ID: 279334

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
826-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### LIN, JOYCE

Provider ID: 265147

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (858) 554-1212

After Hours Phone: (858)  
554-1212

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)  
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### LIN, JOYCE

Provider ID: 265146

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 888-9268

Fax: (888) 539-8781

After Hours Phone: (800)  
888-9268

Provider Gender: Female

NPI: 1427681022

Provider English Spoken: Y

Provider Language(s)  
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### LUONG, TRAN

Provider ID: 279014

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **LUONG, TRAN**


Provider ID: 279015  
Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1821532292

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish,  
Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**


#### **MARTIN, HALEY**


Provider ID: 305025

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093440836


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**


#### **MARTIN, HALEY**

Provider ID: 305024

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093440836

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**


#### **MARTIN, HALEY**

Provider ID: 305027

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female


NPI: 1093440836

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**

#### **MCADAMS, JOSEPH**

Provider ID: 280612

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1104371251

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT


#### **MERRILL, COREY**

Provider ID: 258039

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1386032308

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT


#### **OKADA, MICHELLE**

Provider ID: 278017

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497129860

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT

#### **OKADA, MICHELLE**

Provider ID: 278016

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497129860

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **PELIO, DARREN**




Provider ID: 293440

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES DR  
LA JOLLA, CA 92093  
 Phone: (858) 822-7967  
Fax: (858) 822-6395  
 After Hours Phone: (858) 822-7967

Provider Gender: Male

NPI: 1386791028

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT

#### PELIO, DARREN

Provider ID: 293442

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093


 Phone: (800) 926-8276

Fax: (888) 539-8784

 After Hours Phone: (800) 926-8276

Provider Gender: Male

NPI: 1386791028

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT


#### PERREAULT, MARK

Provider ID: 283583

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1356749451


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT


#### PERREAULT, MARK

Provider ID: 283584

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1356749451


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT


#### ROBERTS, AUDREY

Provider ID: 253254

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (619) 543-5540

 After Hours Phone: (619) 543-5540

Provider Gender: Female

NPI: 1265960256

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

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## D. 专家名录

N




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---



### PHYSICIANS ASSISTANT

---

#### ROBERTS, AUDREY

*Provider ID: 253255*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 *Phone: (858) 657-7876*  
 *After Hours Phone: (858) 657-7876*




*Provider Gender: Female*  
*NPI: 1265960256*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---



### PHYSICIANS ASSISTANT

---

#### SAIKHON, TALIA



*Provider ID: 293439*  
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1699263905*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*CHULA VISTA MED CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*  
*IPA: UCSD Medical Group*




---

### PHYSICIANS ASSISTANT


---

#### SANCHEZ, MICHAEL

*Provider ID: 206907*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 8939 VILLA LA JOLLA DR  
STE 110  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*



*Provider Gender: Male*  
*NPI: 1184135006*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: UCSD Medical Group*

---


### PHYSICIANS ASSISTANT

---

#### SCHWARTZEL, KEVIN

*Provider ID: 214276*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1104277847*

 *Provider English Spoken: Y*  
*Cultural Competency: N*




*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录




 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 8AM-8PM  
M-F 8AM-5PM  
SA 8AM-8PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **PHYSICIANS ASSISTANT**

#### **SHAUL, SHERA**

*Provider ID: 247976*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR  
LA JOLLA, CA 92037*  
 *Phone: (800) 926-8373*  
 *After Hours Phone: (800) 926-8373*  
*Provider Gender: Female*  
*NPI: 1336659507*


 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


### **PHYSICIANS ASSISTANT**




#### **SHAUL, SHERA**

*Provider ID: 247975*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*

 *9400 CAMPUS POINT DR  
LA JOLLA, CA 92093*  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*




*Provider Gender: Female*  
*NPI: 1336659507*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



### **PHYSICIANS ASSISTANT**

#### **SPEH, BRIAN**

*Provider ID: 305010*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR  
LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1124593926*



 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*




### **PHYSICIANS ASSISTANT**

#### **TESFAI, HELEN**

*Provider ID: 277072*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*

 *9350 CAMPUS POINT DR  
LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
*Fax: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1942724042*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **PHYSICIANS ASSISTANT**

#### **WAHLIN, TAMARA**

*Provider ID: 299596*

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

**WAHLIN, TAMARA**

Provider ID: 299602

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

**WAHLIN, TAMARA**

Provider ID: 299601

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

**WEIR, JACQUELINE**

Provider ID: 278202

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932494499

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

**BAILIS, JESSICA**

Provider ID: 300043

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

926-8273  
Provider Gender: Female  
NPI: 1760739049  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### PSYCHOLOGIST

**BOOTH, CHRISTOPHER**  
Provider ID: 209117  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1568893162  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

**BOOTH, CHRISTOPHER**  
Provider ID: 209118  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1568893162

☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### PSYCHOLOGIST

**BOUTELLE, KERRI**  
Provider ID: 302876  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 3344 N TORREY PINES CT  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
☎ Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1780620906  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### PSYCHOLOGIST

**BOUTELLE, KERRI**  
Provider ID: 240034  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1780620906  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


**BOUTELLE, KERRI**


Provider ID: 258988

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

 After Hours Phone: (858)  
246-1654

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---

**CHESHER, NICHOLAS**

Provider ID: 273812

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124539697

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


**CRANDAL, BRENT**

Provider ID: 291463

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8372

Provider Gender: Male

NPI: 1588739452


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


**DUARTE, KRISTEN**


Provider ID: 255479

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PSYCHOLOGIST


**DUARTE, KRISTEN**

Provider ID: 255480

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PSYCHOLOGIST

**EICHEN, DAWN**

Provider ID: 302888

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3344 N TORREY PINES CT  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST


**EICHEN, DAWN**

Provider ID: 245715

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST


**EICHEN, DAWN**

Provider ID: 259524

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

Fax: (858) 246-3181

 After Hours Phone: (858)  
246-1654

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## D. 专家名录

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


**LASSWELL, EVE**


Provider ID: 208260

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1013483635


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---

**LINKE, SARAH**

Provider ID: 273640

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487026415

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---

**MAGINOT-CHESHER, TAMARA**

Provider ID: 273224

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 534-7792

Fax: (619) 471-9017

 After Hours Phone: (858)  
534-7792

Provider Gender: Female

NPI: 1043441165

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


**MENDEZ, ANDRES**

Provider ID: 279058

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1841482692

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### **PELHAM, WILLIAM**

Provider ID: 307681

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1306629399

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### **REED, KRISTIE**

Provider ID: 302867

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 3344 N TORREY PINES CT  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1679869556

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### **REED, KRISTIE**

Provider ID: 291395

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 8950 VILLA LA JOLLA DR  
STE C212

LA JOLLA, CA 92037

☎ Phone: (800) 926-8372

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8372

Provider Gender: Female

NPI: 1679869556

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### **TARLE, STEPHANIE**

Provider ID: 303116

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1659920403

☐ Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST


**ZLATAR, ZVINKA**

Provider ID: 272712

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497139059

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PULMONARY DISEASES

**BAILEY, JACOB**

Provider ID: 299925

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### PULMONARY DISEASES


**JOSHUA, JISHA**

Provider ID: 238060

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi, Malayalam  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PULMONARY DISEASES

**MCGUIRE, WILLIAM**

Provider ID: 299987

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

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## D. 专家名录

MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### PULMONARY DISEASES

**PEARCE, ALEX**  
Provider ID: 300054  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1265896856  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC





**BERMAN, ZACHARY**  
Provider ID: 269319  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1033521190  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

**BRANCH, CODY**  
Provider ID: 283676  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)

926-8273  
Provider Gender: Male  
NPI: 1851770622  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

**CARSWELL, AIMEE**  
Provider ID: 303056  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 554-1212  
Fax: (858) 795-1195  
 After Hours Phone: (858)  
554-1212  
Provider Gender: Female  
NPI: 1619156635  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
EISENHOWER MEDICAL CTR  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **CHENG, KAREN**

Provider ID: 283227

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **FAZELI, SOUDABEH**

Provider ID: 299993

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639553613


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **FORCIER, NANCY**

Provider ID: 286955

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,


Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **FOWLER, KATHRYN**

Provider ID: 201290

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SCRIPPS MEMORIAL




HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

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## D. 专家名录

SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS GREEN HOSPITAL,  
SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **GRISSOM, MURRAY**

Provider ID: 271568  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273


Provider Gender: Male  
NPI: 1720465396


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, Stanford Health  
Care, STANFORD HEALTH  
CARE TRI-VALLEY  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**



#### **HANNSUN, GEMMY**

Provider ID: 282790  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1992120026

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Khmer, Spanish  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **HORKY, LAURA**

Provider ID: 241854

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1598967812

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **HORKY, LAURA**

Provider ID: 241855

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR

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## D. 专家名录

LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1598967812  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

**JAFFRAY, PAUL**  
Provider ID: 299959  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1275700999  
☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Los  
Angeles General Medical  
Center  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

**JAZBEH, SAMMER**  
Provider ID: 271128  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1770825457  
☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, PROVIDENCE  
LITTLE CO OF MARY MED CTR  
TORRANCE, PROVIDENCE  
LITTLE CO OF MARY MED CTR

SAN PEDRO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

**KHURANA, AMAN**  
Provider ID: 307767  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1427496710  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

**KONDILI, DHIMITER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 283144

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **MARKS, ROBERT**

Provider ID: 300066

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ST MARY  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **RITCHIE, DAVID**

Provider ID: 300033

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1407201916

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **SADAT, SAYED**

Provider ID: 299967

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **SCHULTZ, HEATHER**

Provider ID: 240343

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y

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## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **SEARLEMAN, ADAM**

Provider ID: 299950

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1134570641

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **SLATER, JERRY**

Provider ID: 283311

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON, LOMA LINDA


UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**


#### **SPENGLER, NATHAN**

Provider ID: 303050

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **TADDONIO, MICHAEL**

Provider ID: 240406

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male




NPI: 1386987261

 Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录



Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### **RADIOLOGY DIAGNOSTIC**

#### **TADROS, ANTHONY**

Provider ID: 268545  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1306112057


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None



American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **THOMPSON, COLE**

Provider ID: 299990  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1700315264




 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group



### **RADIOLOGY DIAGNOSTIC**

#### **UNSDORFER, KYLE**

Provider ID: 300036  
Board Certified Specialty: No  
UCSD MEDICAL GROUP




 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1285165183


 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **VAHDOT, NOUSHIN**

Provider ID: 300069  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1396700852

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **RADIOLOGY DIAGNOSTIC**

#### **YORK, VINCENT**

*Provider ID: 283518*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *9300 CAMPUS POINT DR  
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1790146611*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **RADIOLOGY DIAGNOSTIC**


#### **ZAPALA, MATTHEW**

*Provider ID: 307677*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *9300 CAMPUS POINT DR  
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1346482809*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSF*

*BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
MEDICAL CTR AT UCSF, UCSF  
Medical Center At Mission Bay,  
UCSF MEDICAL CENTER AT  
MOUNT ZION*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **REGISTERED DIETITIAN / NUTRITIONIST**

#### **SIEVERING, DENISE**

*Provider ID: 268249*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *9350 CAMPUS POINT DR  
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1356478929*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **REGISTERED PHYSICAL THERAPIST**


#### **BERGERON, PATRICK**

*Provider ID: 206533*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *9350 CAMPUS POINT DR  
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1285061390*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*


*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **BERGERON, PATRICK**

Provider ID: 258296

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### **REGISTERED PHYSICAL THERAPIST**

---

#### **BUNOSKY, ABIGAIL**

Provider ID: 246021

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE LLD

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **CHIEN, PEI**

Provider ID: 214699

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### **REGISTERED PHYSICAL THERAPIST**

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#### **CHIEN, PEI**

Provider ID: 258324

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891260238

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

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## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST

---

#### **HOUSELY, ALEXIS**

Provider ID: 299971  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1689321416  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Website: N/A  
IPA: UCSD Medical Group


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### REGISTERED PHYSICAL THERAPIST

---


#### **MAROLLA, ALICE**

Provider ID: 241145  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1477018729

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: UCSD Medical Group

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### REGISTERED PHYSICAL THERAPIST

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#### **RUDD, CHRISTOPHER**

Provider ID: 207559  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1831539337  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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### REGISTERED PHYSICAL THERAPIST

---

#### **RUDD, CHRISTOPHER**

Provider ID: 258372  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037  
 Phone: (855) 543-0333  
Fax: (858) 657-6873  
 After Hours Phone: (855)  
543-0333  
Provider Gender: Male  
NPI: 1831539337  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST


---


#### **SKINNER, NICOLE**

Provider ID: 206546

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1386964997

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### REGISTERED PHYSICAL THERAPIST


---

#### **TRIMM, CASSIDY**

Provider ID: 258442

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)  
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST

---

#### **TRIMM, CASSIDY**


Provider ID: 258443

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE LLD

LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)  
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### REGISTERED PHYSICAL THERAPIST


---


#### **VASQUEZ, BENJAMIN**

Provider ID: 200968

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037




 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

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## D. 专家名录


Provider Gender: Male  
NPI: 1568938413  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **REGISTERED PHYSICAL THERAPIST**

#### **VASQUEZ, BENJAMIN**




Provider ID: 258480  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037  
 Phone: (858) 657-6879  
Fax: (858) 657-6873  
 After Hours Phone: (858)  
657-6879

Provider Gender: Male  
NPI: 1568938413

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA




JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **REGISTERED PHYSICAL THERAPIST**

#### **WILLIAMS, STACY**




Provider ID: 258496  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037  
 Phone: (858) 657-6879  
Fax: (858) 657-6873  
 After Hours Phone: (858)  
657-6879

Provider Gender: Female  
NPI: 1689962169

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **REGISTERED PHYSICAL THERAPIST**




#### **YU, AUDRINE**

Provider ID: 258481  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE LLD  
LA JOLLA, CA 92037  
 Phone: (858) 657-6879  
Fax: (858) 657-6873  
 After Hours Phone: (858)  
657-6879

Provider Gender: Female  
NPI: 1639271208

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SPEECH PATHOLOGIST**

#### **SCHIEDERMAYER, BENJAMIN**

Provider ID: 288939

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SPEECH PATHOLOGIST

**SCHIEDERMAYER, BENJAMIN**

Provider ID: 288938

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SPEECH PATHOLOGIST

**UNGER, LINDSEY**

Provider ID: 265338

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY COLON SURGERY

**LIU, SHANGLEI**

Provider ID: 273364

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1043558653

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UNIVERSITY HSP  
OF SAN DIEGO CO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY COLON SURGERY

**LOPEZ, NICOLE**




Provider ID: 286388

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
 Phone: (858) 822-6100  
 After Hours Phone: (858)  
822-6100

Provider Gender: Female  
NPI: 1518163005

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A



IPA: UCSD Medical Group

### **SURGERY COLON SURGERY**

#### **PARRY, LISA**


Provider ID: 278551

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1235369067

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY COLON SURGERY**

#### **RAMAMOORTHY, SONIA**

Provider ID: 286371


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1801812656


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY CRITICAL CARE**

#### **ADAMS, LAURA**

Provider ID: 284408


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1144616541

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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## D. 专家名录


<hr/> <b>SURGERY CRITICAL CARE</b> <hr/> <b>POTENZA, BRUCE</b> Provider ID: 277299 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (619) 543-7200 After Hours Phone: (619) 543-7200 Provider Gender: Male NPI: 1548281496 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	<hr/> <b>SURGERY GENERAL</b> <hr/> <b>AL-NOURI, OMAR</b> Provider ID: 211904 Board Certified Specialty: No UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1770742264 Provider English Spoken: Y Provider Language(s) Spoken: Arabic	<hr/> <b>SURGERY GENERAL</b> <hr/> <b>AL-NOURI, OMAR</b> Provider ID: 211905 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1770742264 Provider English Spoken: Y Provider Language(s) Spoken: Arabic Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None	<hr/> <b>SURGERY CRITICAL CARE</b> <hr/> <b>VENTRO, GEORGE</b> Provider ID: 284419 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (800) 926-8273	<hr/> <b>SURGERY GENERAL</b> <hr/> <b>AL-NOURI, OMAR</b> Provider ID: 211904 Board Certified Specialty: No UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1770742264 Provider English Spoken: Y Provider Language(s) Spoken: Arabic	<hr/> <b>SURGERY GENERAL</b> <hr/> <b>AL-NOURI, OMAR</b> Provider ID: 211905 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1770742264 Provider English Spoken: Y Provider Language(s) Spoken: Arabic Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None
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## D. 专家名录

American Sign Language (ASL):  Website: N/A  
IPA: UCSD Medical Group

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY GENERAL**


#### **ARMANI, AVA**


Provider ID: 282142

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858)  
822-6100

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: MEDICAL  
CTR AT UCSF, UCSF Medical  
Center At Mission Bay, UCSF  
MEDICAL CENTER AT MOUNT  
ZION, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY GENERAL**


#### **CLARY, BRYAN**


Provider ID: 202568

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982787131

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY GENERAL**

#### **HORGAN, SANTIAGO**

Provider ID: 286380

Board Certified Specialty: No  
UCSD MEDICAL GROUP



 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (619) 471-0755

 After Hours Phone: (619)  
471-0755

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY GENERAL**


#### **JACOBSEN, GARTH**

Provider ID: 201728

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (619) 471-0755


 After Hours Phone: (619)  
471-0755

Provider Gender: Male




NPI: 1265649966

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### SURGERY GENERAL

#### **SANTORELLI, JARRETT**

Provider ID: 272304  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1033529201

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### SURGERY GENERAL VASCULAR

#### **BARLEBEN, ANDREW**




Provider ID: 275371  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1497936900

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### SURGERY GENERAL

### VASCULAR

#### **BARLEBEN, ANDREW**

Provider ID: 275373  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037




 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1497936900

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

### VASCULAR

#### **GAFFEY, ANN**

Provider ID: 287012  
Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1316232010

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### VASCULAR

### HOWE, STEVEN

Provider ID: 206760

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
FL 1

LA JOLLA, CA 92037

Phone: (858) 657-7777

Fax: (858) 657-5058

After Hours Phone: (858)  
657-7777

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY HAND ORTHOPEDIC

#### STEPHENSON, SAMUEL

Provider ID: 284935

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY HAND ORTHOPEDIC

#### STEPHENSON, SAMUEL

Provider ID: 284936

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1578058665

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

---

### **SURGERY NEUROLOGICAL**

#### **BARBA, DAVID**

Provider ID: 275678

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE 2A

LA JOLLA, CA 92037

Phone: (619) 543-5540

Fax: (619) 287-7663

After Hours Phone: (619)  
543-5540

Provider Gender: Male

NPI: 1093730251

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **SURGERY NEUROLOGICAL**

#### **BEAUMONT, THOMAS**

Provider ID: 214126

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (858) 657-8540

After Hours Phone: (858)  
657-8540

Provider Gender: Male

NPI: 1497067573

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **SURGERY NEUROLOGICAL**

#### **BEN-HAIM, SHARONA**

Provider ID: 244070

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1942469663

Provider English Spoken: Y

Provider Language(s)

Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **SURGERY NEUROLOGICAL**

#### **BLASKIEWICZ, DONALD**

Provider ID: 270282

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1215176839

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


### THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY NEUROLOGICAL**


#### MARSHALL, LAWRENCE

Provider ID: 244149

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1750306171

 Provider English Spoken: Y

 Provider Language(s)


Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY NEUROLOGICAL**

#### MURTHY, NIKHIL

Provider ID: 299995

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1710371273

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY NEUROLOGICAL**

#### MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1710371273

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY NEUROLOGICAL**


#### OSORIO, JOSEPH

Provider ID: 242005

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录



 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**


#### **OSORIO, JOSEPH**

Provider ID: 242006  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093


 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273


Provider Gender: Male  
NPI: 1437416591

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**


#### **PHAM, MARTIN**

Provider ID: 244159  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1609130921


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**


#### **U, HOI**

Provider ID: 244133  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273


Provider Gender: Male  
NPI: 1164468146


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM


 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **ANDRY, JAMES**



Provider ID: 302085  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 9834 GENESEE AVE STE  
228  
LA JOLLA, CA 92037

 Phone: (858) 824-1703  
Fax: (858) 455-6473

 After Hours Phone: (858)  
824-1703

Provider Gender: Male  
NPI: 1679726103

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS MERCY  
HOSPITAL, SHARP CHULA  
VISTA MED CTR, SHARP

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## D. 专家名录


CORONADO HOSP AND  
HEALTHCARE CTR, Sharp  
Grossmont Hospital, SHARP  
MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **SURGERY ORTHOPEDIC**

#### **BLAIS, MICAH**

Provider ID: 299944

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1972867562

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

#### **BLAIS, MICAH**

Provider ID: 299945

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1972867562

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


#### **BUKATA, SUSAN**

Provider ID: 277947

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932140639


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**


#### **CHIARAPPA, FRANK**

Provider ID: 244460

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1932536828

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

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## D. 专家名录

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


**CHOI, JIHOON**

Provider ID: 284787

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


**CHOI, JIHOON**

Provider ID: 284786

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8181

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


**FLINT, JAMES**


Provider ID: 203177

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


**GOEB, YANNICK**

Provider ID: 284793

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1730542747

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

*Provider English Spoken: Y*  
 *Provider Language(s) Spoken: German, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **SURGERY ORTHOPEDIC**

#### **GOEB, YANNICK**

*Provider ID: 284792*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9400 CAMPUS POINT DR  
 LA JOLLA, CA 92093  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1730542747*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: German, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA*

JOLLA JOHN SALLY  
 THORNTON  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **SURGERY ORTHOPEDIC**

#### **KUSNEZOV, NICHOLAS**

*Provider ID: 303194*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 9834 GENESEE AVE STE  
 228  
 LA JOLLA, CA 92037  
 *Phone: (858) 455-9942*  
*Fax: (858) 455-6473*  
 *After Hours Phone: (858) 455-9942*  
*Provider Gender: Male*  
*NPI: 1396185161*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, TRI CITY MEDICAL CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP CHULA VISTA MED CTR, SHARP*

CORONADO HOSP AND  
 HEALTHCARE CTR, Sharp  
 Grossmont Hospital, Sharp  
 Grossmont Hospital, SHARP  
 MEMORIAL HOSPITAL  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### **SURGERY ORTHOPEDIC**

#### **PALLIA, CHRISTOPHER**

*Provider ID: 302103*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 9834 GENESEE AVE STE  
 228  
 LA JOLLA, CA 92037  
 *Phone: (858) 455-9942*  
*Fax: (858) 455-6473*  
 *After Hours Phone: (858) 455-9942*  
*Provider Gender: Male*  
*NPI: 1497751457*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL,*

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## D. 专家名录

SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **SURGERY ORTHOPEDIC**

**SULLIVAN, THOMAS**

Provider ID: 285246

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

**SULLIVAN, THOMAS**

Provider ID: 285245

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY PLASTIC**

**HINCHCLIFF, KATHARINE**

Provider ID: 277289

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


### **SURGERY PLASTIC**


**REID, CHRISTOPHER**

Provider ID: 224796

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

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## D. 专家名录

Provider Gender: Male  
NPI: 1982964276  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY THORACIC**

#### **BOYS, JOSHUA**

Provider ID: 243533  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (858) 657-7777  
🕒 After Hours Phone: (858)  
657-7777  
Provider Gender: Male  
NPI: 1114368990  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY THORACIC**

#### **KEARNS, MARK**

Provider ID: 274296  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (858) 657-8817  
Fax: (888) 539-8781  
🕒 After Hours Phone: (858)  
657-8817  
Provider Gender: Male  
NPI: 1033683719  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CEDARS  
SINAI MEDICAL CENTER,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT

PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY THORACIC**

#### **KEARNS, MARK**

Provider ID: 274297  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037  
☎ Phone: (858) 647-8817  
Fax: (858) 853-9878  
🕒 After Hours Phone: (858)  
647-8817  
Provider Gender: Male  
NPI: 1033683719  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CEDARS  
SINAI MEDICAL CENTER,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY THORACIC**

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## D. 专家名录

### **POLLEMA, TRAVIS**

Provider ID: 210576

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871752956

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### **SURGERY THORACIC**

### **RAMIREZ, ALFREDO**

Provider ID: 256390

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1003829417

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY HSP OF SAN  
DIEGO CO, UCSD MEDICAL  
CTR, UCSD LA JOLLA JOHN  
SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### **SURGERY THORACIC**

### **ZANDER, ASHLEY**

Provider ID: 291383

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

#### **SURGERY THORACIC**

### **ZANDER, ASHLEY**

Provider ID: 291382

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

#### **SURGERY THORACIC**

### **ZANDER, ASHLEY**

Provider ID: 291381

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 657-7876

Fax: (888) 539-8781

After Hours Phone: (858)  
657-7876

Provider Gender: Male

NPI: 1902814379

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 249-3534

After Hours Phone: (858)  
249-3534

Provider Gender: Male

NPI: 1073758652

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952756207

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033630173

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## D. 专家名录

*Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### LA MESA

#### **CARDIOVASCULAR DISEASE**

##### **KOTHA, PURUSHOTHAM**

*Provider ID: 32053*  
*Board Certified Specialty: Yes*  
*PURUSHOTHAM AND AKTHER*  
*KOTHA MD INC*  
 8860 CENTER DR STE 400  
 LA MESA, CA 91942  
 *Phone: (619) 229-1995*  
*Fax: (619) 229-1109*  
 *After Hours Phone: (619)*  
*229-1995*  
*Provider Gender: Male*  
*NPI: 1093730814*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Hindi, Spanish,*  
*Telugu*  
*Cultural Competency: N*  
*Hospital Affiliation: ALVARADO*  
*HOSPITAL LLC, GROSSMONT*  
*HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

#### **CARDIOVASCULAR DISEASE**

##### **REDDY, REDDIWANDLA**

*Provider ID: 265393*  
*Board Certified Specialty: No*  
*BLUE SHIELD PROMISE*  
*HEALTH PLAN DIRECT*  
 5565 GROSSMONT  
 CENTER DR STE 202  
 LA MESA, CA 91942  
 *Phone: (619) 461-6130*  
*Fax: (619) 461-3108*  
 *After Hours Phone: (619)*  
*461-6130*  
*Provider Gender: Male*  
*NPI: 1710996384*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Kannada, Spanish,*  
*Telugu*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
*GROSSMONT HOSPITAL,*  
*ALVARADO HOSPITAL LLC*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

*Hours: M-F 8:30AM-5PM*  
 *Website: N/A*  
*IPA: BLUE SHIELD PROMISE*  
*HEALTH PLAN DIRECT*

#### **CARDIOVASCULAR DISEASE**

##### **SHEREV, DIMITRI**

*Provider ID: 290704*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 8851 CENTER DR STE 304  
 LA MESA, CA 91942  
 *Phone: (619) 867-0557*  
*Fax: (619) 867-0558*  
 *After Hours Phone: (619)*  
*867-0557*  
*Provider Gender: Male*  
*NPI: 1154323996*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Bulgarian, Russian,*  
*Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
*MERCY HOSPITAL,*  
*GROSSMONT HOSPITAL,*  
*ALVARADO COMMUNITY*  
*HOSPITAL, SHARP MEMORIAL*  
*HOSPITAL, SCRIPPS*  
*MEMORIAL HOSPITAL,*  
*ALVARADO HOSPITAL LLC,*  
*SHARP CHULA VISTA MED*  
*CTR, SHARP CHULA VISTA*  
*MED CTR, TRI CITY MEDICAL*  
*CTR, SCRIPPS MERCY*  
*HOSPITAL CHULA VISTA,*

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## D. 专家名录


Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**


---

**LANE, KIMBERLY**

Provider ID: 295955

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 8851 CENTER DR STE 501  
LA MESA, CA 91942

 Phone: (619) 697-2456

Fax: (858) 429-7930

 After Hours Phone: (619)  
697-2456

Provider Gender: Female


NPI: 1457670119


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

---


**RESELLI, LYNDSEY**


Provider ID: 217693

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8881 FLETCHER PKWY STE  
205

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)  
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **CERTIFIED NURSE PRACTITIONER**

---

**RESELLI, LYNDSEY**


Provider ID: 217692


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8881 FLETCHER PKWY STE

200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)  
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **EMERGENCY MEDICINE**


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**BELLOMO, THOMAS**

Provider ID: 205600

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 5565 GROSSMONT  
CENTER DR STE 2 STE 2  
LA MESA, CA 91942



 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)  
713-5375

Provider Gender: Male

NPI: 1700926698



 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录






*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*




### **EMERGENCY MEDICINE**

**LOVEJOY, AMY**  
*Provider ID: 206106*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942  
 *Phone: (619) 713-5375*  
*Fax: (619) 713-5379*  
 *After Hours Phone: (619) 713-5375*  
*Provider Gender: Female*  
*NPI: 1790856557*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY*








*CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **EMERGENCY MEDICINE**

**QUINONES-PEREZ, BIANCA**  
*Provider ID: 206948*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942  
 *Phone: (619) 713-5375*  
*Fax: (619) 713-5379*  
 *After Hours Phone: (619) 713-5375*  
*Provider Gender: Female*  
*NPI: 1124360565*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**  
*Provider ID: 268693*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 5565 GROSSMONT CENTER DR LA MESA, CA 91942  
 *Phone: (619) 589-5414*  
*Fax: (619) 589-7391*  
 *After Hours Phone: (619) 589-5414*  
*Provider Gender: Female*  
*NPI: 1063558856*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **TAGHIZADEH, BEHZAD**

Provider ID: 269161

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405  
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)  
582-2404

Provider Gender: Male

NPI: 1275514986

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **YELLEN, LAURENCE**

Provider ID: 269173

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405  
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)  
582-2404

Provider Gender: Male

NPI: 1477680551

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC,

USC Arcadia Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### MATERNAL AND FETAL MEDICINE

#### **ADAMI, REBECCA**

Provider ID: 272676

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1992149447

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### MATERNAL AND FETAL MEDICINE

#### **MCCULLOUGH, DEIRDRE**

Provider ID: 244873

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (858) 966-6710*  
*Provider Gender: Female*  
*NPI: 1639153018*  
☐ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
♿ *Accessibility: CONTACT PROVIDER*  
🕒 *Hours: M-F 8AM-5PM*  
🌐 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
*Provider ID: 296997*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
📍 8851 CENTER DR STE 201  
LA MESA, CA 91942  
☎ *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*  
☎ *After Hours Phone: (858)*

966-6710  
*Provider Gender: Female*  
*NPI: 1124413026*  
☐ *Provider English Spoken: Y*  
☐ *Provider Language(s) Spoken: Hungarian, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
♿ *Accessibility: CONTACT PROVIDER*  
🕒 *Hours: M-F 8AM-5PM*  
🌐 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

### MATERNAL AND FETAL MEDICINE

**REIMERS, REBECCA**  
*Provider ID: 294656*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
📍 8851 CENTER DR STE 201  
LA MESA, CA 91942  
☎ *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*  
☎ *After Hours Phone: (858) 966-6710*

*Provider Gender: Female*  
*NPI: 1801207634*  
☐ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
♿ *Accessibility: CONTACT PROVIDER*  
🕒 *Hours: M-F 8AM-5PM*  
🌐 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### MATERNAL AND FETAL MEDICINE

**REIMERS, REBECCA**  
*Provider ID: 294654*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
📍 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942  
☎ *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*  
☎ *After Hours Phone: (858) 966-6710*  
*Provider Gender: Female*  
*NPI: 1801207634*  
☐ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY*

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## D. 专家名录


*CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


*IPA: Rady Childrens Health Network*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

*AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp*

*Grossmont Hospital, Sharp*


*Grossmont Hospital*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*


### **MATERNAL AND FETAL MEDICINE**

**RICHARDSON, ALVIE**

*Provider ID: 277317*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942

 *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*

 *After Hours Phone: (858) 966-6710*

*Provider Gender: Male  
NPI: 1154305977*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital*


### **MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**

*Provider ID: 277305*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942

 *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*

 *After Hours Phone: (858) 966-6710*

*Provider Gender: Male  
NPI: 1477563302*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN*


### **MATERNAL AND FETAL MEDICINE**

**WILLIAMS, KRISTIN**

*Provider ID: 277384*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942

 *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*

 *After Hours Phone: (858) 966-6710*




*Provider Gender: Female  
NPI: 1992847131*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP,*



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

SAN MATEO MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, TRI CITY  
MEDICAL CTR, CALIFORNIA  
PACIFIC MED CTR,  
CALIFORNIA PACIFIC MED  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **NEPHROLOGY**





#### **LEININGER, DANIEL**




Provider ID: 295640  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 8851 CENTER DR STE 505  
LA MESA, CA 91942  
 Phone: (619) 461-3880  
Fax: (619) 461-3895  
 After Hours Phone: (619)  
461-3880  
Provider Gender: Male  
NPI: 1164956264  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Sharp  
Grossmont Hospital,  
GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC,  
ALVARADO COMMUNITY  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **NEPHROLOGY**

#### **LEININGER, DANIEL**

Provider ID: 293480  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 8851 CENTER DR STE 505  
LA MESA, CA 91942  
 Phone: (619) 461-3880  
Fax: (619) 461-3895  
 After Hours Phone: (619)  
461-3880  
Provider Gender: Male  
NPI: 1164956264  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital,  
GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC,

ALVARADO COMMUNITY  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **NEUROLOGY**

#### **MOHAMMAD, AHMAD**

Provider ID: 39868  
Board Certified Specialty: No  
EAST COUNTY NEUROLOGY  
ASSOCIATES INC  
 8851 CENTER DR STE 307  
LA MESA, CA 91942  
 Phone: (619) 337-7900  
Fax: (619) 337-7902  
 After Hours Phone: (619)  
337-7900  
Provider Gender: Male  
NPI: 1902973472  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Farsi,  
French, German, Pashto,  
Persian, Spanish  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MERCY HOSPITAL, SHARP  
CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


### **OPHTHALMOLOGY**

#### **CHIU, STEPHAN**


Provider ID: 297585

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5565 GROSSMONT  
CENTER DR STE 551  
LA MESA, CA 91942


 Phone: (619) 465-2020


Fax: (619) 698-1189

 After Hours Phone: (619)  
465-2020

Provider Gender: Male

NPI: 1053846956

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin, Spanish  
Cultural Competency: N

Hospital Affiliation: RONALD  
REAGAN UCLA MED CTR,  
SANTA MONICA UCLA MED  
CTR, SCRIPPS MEMORIAL  
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### **OPHTHALMOLOGY**

#### **HAIGHT, BRUCE**

Provider ID: 295984

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5565 GROSSMONT  
CENTER DR STE 2-3  
LA MESA, CA 91942

 Phone: (619) 463-0331

Fax: (619) 463-0138

 After Hours Phone: (619)  
463-0331

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8:30AM-4PM  
F 8AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**


#### **HAIGHT, BRUCE**

Provider ID: 269112

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 5565 GROSSMONT  
CENTER DR BLDG 3 STE  
551

LA MESA, CA 91942

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)  
898-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

#### **HAIGHT, BRUCE**

Provider ID: 305885

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## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT  
CENTER DR BLDG 3 STE  
551

LA MESA, CA 91942

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)  
898-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### OPHTHALMOLOGY

#### HAIGHT, BRUCE

Provider ID: 288660

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

7339 EL CAJON BLVD STE  
J AND K

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### OPHTHALMOLOGY

#### HUDSON, HENRY

Provider ID: 297578

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

7339 EL CAJON BLVD STE  
J AND K

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Provider Gender: Male

NPI: 1851349195

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

### OPHTHALMOLOGY

#### HUDSON, HENRY

Provider ID: 297577

Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT

CENTER DR STE 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Provider Gender: Male

NPI: 1851349195

Provider English Spoken: Y

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## D. 专家名录





 *Provider Language(s)*  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL, TRI  
 CITY MEDICAL CTR, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, SCRIPPS MERCY  
 HOSPITAL, SCRIPPS  
 MEMORIAL HOSPITAL, Sharp  
 Grossmont Hospital  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 *Accessibility: CONTACT  
 PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
 IPA: IHP of Southern Cal-PHP,  
 UCSD Medical Group





### **OPHTHALMOLOGY**

**HUDSON, HENRY**  
 Provider ID: 306768  
 Board Certified Specialty: Yes  
 UCSD MEDICAL GROUP  
 5565 GROSSMONT  
 CENTER DR STE 551  
 LA MESA, CA 91942  
 *Phone: (619) 465-2020*  
*Fax: (619) 698-1189*  
 *After Hours Phone: (619)  
 465-2020*  
 Provider Gender: Male  
 NPI: 1851349195  
 *Provider English Spoken: Y*





 *Provider Language(s)*  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL, TRI  
 CITY MEDICAL CTR, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, SCRIPPS MERCY  
 HOSPITAL, SCRIPPS  
 MEMORIAL HOSPITAL, Sharp  
 Grossmont Hospital  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 6\99  
 American Sign Language (ASL):  
 N  
 *Accessibility: CONTACT  
 PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
 IPA: IHP of Southern Cal-PHP,  
 UCSD Medical Group

### **OPTOMETRIST**

**AOTO, KIM**  
 Provider ID: 288652  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 7339 EL CAJON BLVD STE  
 J AND K  
 LA MESA, CA 91942  
 *Phone: (619) 722-8460*  
*Fax: (619) 722-8465*  
 *After Hours Phone: (619)  
 722-8460*  
 Provider Gender: Female  
 NPI: 1780935650  
 *Provider English Spoken: Y*

 *Provider Language(s)*  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 *Accessibility: CONTACT  
 PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### **OTOLARYNGOLOGY**


**MOSHTAGHI, OMID**  
 Provider ID: 302380  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 5565 GROSSMONT  
 CENTER DR BLDG 3 STE  
 101  
 LA MESA, CA 91942  
 *Phone: (619) 464-3353*  
*Fax: (619) 464-6720*  
 *After Hours Phone: (619)  
 464-3353*  
 Provider Gender: Male  
 NPI: 1730675927  
 *Provider English Spoken: Y*  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL, Sharp  
 Grossmont Hospital  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### OTOLARYNGOLOGY


#### **SAEZ, NEIL**

*Provider ID: 302431*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 5565 GROSSMONT CENTER DR BLDG 3 STE 101

LA MESA, CA 91942


 *Phone: (619) 464-3353*

*Fax: (619) 464-6720*

 *After Hours Phone: (619) 464-3353*

*Provider Gender: Male*

*NPI: 1518456508*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CHULA VISTA MED CTR,*

*SHARP MEMORIAL HOSPITAL,*

*SCRIPPS MERCY HOSPITAL*

*CHULA VISTA*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*


### PEDIATRIC EMERGENCY MEDICINE

#### **BETTY, MARYANN RIVA**

*Provider ID: 245753*

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942

 *Phone: (619) 713-5375*

*Fax: (619) 713-5379*

 *After Hours Phone: (619) 713-5375*

*Provider Gender: Female*

*NPI: 1285014498*


 *Provider English Spoken: Y Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*


### PEDIATRIC EMERGENCY


### MEDICINE

#### **GROSS, MATTHEW**

*Provider ID: 297177*

*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

 5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942

 *Phone: (619) 713-5375*

*Fax: (619) 713-5379*

 *After Hours Phone: (619) 713-5375*

*Provider Gender: Male*

*NPI: 1942223664*

 *Provider English Spoken: Y Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1PM-10PM*

*M-F 4PM-10PM*

*SA 1PM-10PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY MEDICINE

#### **JOSHI, WEENA**

*Provider ID: 262233*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

5565 GROSSMONT CENTER DR STE 2 STE 2  
 LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619) 713-5375

Provider Gender: Female

NPI: 1376862177

Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619) 713-5375

Provider Gender: Female

NPI: 1689646689

Provider English Spoken: Y

Provider Language(s) Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619) 713-5375

Provider Gender: Male

NPI: 1467898239

Provider English Spoken: Y

Provider Language(s) Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: VALLEY

CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC EMERGENCY MEDICINE**

**MINKA, GENEVIEVE**

Provider ID: 205335

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

5565 GROSSMONT CENTER DR STE 2

### **PEDIATRIC EMERGENCY MEDICINE**

**OZAKI, YOSHIHIRO**

Provider ID: 241925

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

5565 GROSSMONT CENTER DR STE 2

### **PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**

Provider ID: 205786

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

5565 GROSSMONT CENTER DR STE 2  
 LA MESA, CA 91942

Phone: (619) 713-5375

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## D. 专家名录

Fax: (619) 713-5379

☎ After Hours Phone: (619)  
713-5375

Provider Gender: Female

NPI: 1477626513

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: GLENDALE  
ADVENTIST MED CTR,  
GLENDALE MEMORIAL HOSP  
AND HEALTH CTR, TRI CITY  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, VALLEY CHILDRENS  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **VARGAS, JACLYN**

Provider ID: 285936

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1619359718

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Los Angeles General  
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **WANG, EMILY**

Provider ID: 265955

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 5565 GROSSMONT  
CENTER DR STE 2 BLDG 2  
LA MESA, CA 91942

☎ Phone: (619) 713-5375

Fax: (619) 713-5379

☎ After Hours Phone: (619)  
713-5375

Provider Gender: Female

NPI: 1427142363

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRICS

#### **CLAY, CORRIE**

Provider ID: 278807

Board Certified Specialty: No  
BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT

📍 8881 FLETCHER PKWY STE  
200  
LA MESA, CA 91942

☎ Phone: (619) 464-6434

Fax: (619) 464-5109

☎ After Hours Phone: (619)  
464-6434


Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 1437207750

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM  
 Website: N/A  
IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT


### **PHYSICIANS ASSISTANT**


#### **FERRARA, SAMANTHA**

Provider ID: 306005  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 7339 EL CAJON BLVD STE 1  
LA MESA, CA 91942  
 Phone: (619) 698-0606  
Fax: (619) 698-0609  
 After Hours Phone: (619)  
698-0606  
Provider Gender: Female  
NPI: 1437822434  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:

EISENHOWER MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM



 Website: N/A  
IPA: Community Care IPA LLC

### **PHYSICIANS ASSISTANT**

#### **HINKLE, CORINNE**



Provider ID: 305425  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 7339 EL CAJON BLVD STE 1  
LA MESA, CA 91942  
 Phone: (619) 698-0606  
Fax: (619) 698-0609  
 After Hours Phone: (619)  
698-0606

Provider Gender: Female  
NPI: 1508451949

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: Valleywise  
Health Medical Center


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC



### **PHYSICIANS ASSISTANT**

#### **RAYMOND, ALAIN**



Provider ID: 269057  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 8851 CENTER DR STE 505  
LA MESA, CA 91942  
 Phone: (619) 461-3880  
Fax: (619) 461-3895

 After Hours Phone: (619)  
461-3880

Provider Gender: Male  
NPI: 1164729125


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Community Care IPA LLC

### **PHYSICIANS ASSISTANT**

#### **WHITE, KYLE**

Provider ID: 302382  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 5565 GROSSMONT  
CENTER DR BLDG 3 STE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

101  
LA MESA, CA 91942  
☎ Phone: (619) 464-3353  
Fax: (619) 464-7509  
🕒 After Hours Phone: (619) 464-3353  
Provider Gender: Male  
NPI: 1922768860  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PODIATRIST

**CAINE, SAMUEL**  
Provider ID: 308213  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 5565 GROSSMONT CENTER DR STE 510  
LA MESA, CA 91942  
☎ Phone: (619) 303-7130  
Fax: (619) 303-7150  
🕒 After Hours Phone: (619) 303-7130  
Provider Gender: Male  
NPI: 1396230298  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SHARP CHULA  
VISTA MED CTR, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### RADIATION ONCOLOGY

**CARMONA, RUBEN**  
Provider ID: 303099  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942  
☎ Phone: (619) 740-4500  
Fax: (619) 740-8499  
🕒 After Hours Phone: (619) 740-4500  
Provider Gender: Male  
NPI: 1275929242  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### RADIATION ONCOLOGY

**COLEMAN, LORI**  
Provider ID: 221089  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942  
☎ Phone: (619) 740-4500  
Fax: (619) 740-8499  
🕒 After Hours Phone: (619) 740-4500  
Provider Gender: Female  
NPI: 1053348920  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
PALOMAR MEDICAL CENTER,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 19\100

American Sign Language (ASL):  N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**


#### **VOLPP, PAUL**

Provider ID: 221104

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 5555 GROSSMONT  
CENTER DR

LA MESA, CA 91942


 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619)  
740-4500

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 19\100


American Sign Language (ASL):

N

 Accessibility: CONTACT

#### **PROVIDER**

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**


#### **WEINSTEIN, GEOFFREY**

Provider ID: 220040

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 5555 GROSSMONT  
CENTER DR

LA MESA, CA 91942


 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619)  
740-4500

Provider Gender: Male

NPI: 1841233947

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **RADIOLOGY DIAGNOSTIC**


#### **MOORE, BRIAN**

Provider ID: 307543

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 5555 GROSSMONT  
CENTER DR

LA MESA, CA 91942

 Phone: (619) 740-5100

Fax: (619) 740-8100

 After Hours Phone: (619)  
740-5100

Provider Gender: Male

NPI: 1831144005

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### **RADIOLOGY DIAGNOSTIC**

#### **MOORE, BRIAN**

Provider ID: 243960

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 8860 CENTER DR STE 100  
LA MESA, CA 91942

 Phone: (619) 460-2770

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## D. 专家名录

Fax: (619) 460-2774

☎ After Hours Phone: (619) 460-2770

Provider Gender: Male

NPI: 1831144005

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 7AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **RADIOLOGY DIAGNOSTIC**

#### **VENKATESH, VIJAY**

Provider ID: 269659

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 8860 CENTER DR STE 100  
LA MESA, CA 91942

☎ Phone: (619) 460-2770

Fax: (619) 460-2774

☎ After Hours Phone: (619) 460-2770

Provider Gender: Male

NPI: 1689627085

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **RADIOLOGY DIAGNOSTIC**

#### **VENKATESH, VIJAY**

Provider ID: 307528

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 5555 GROSSMONT  
CENTER DR

LA MESA, CA 91942

☎ Phone: (619) 740-5100

Fax: (619) 740-8100

☎ After Hours Phone: (619) 740-5100

Provider Gender: Male

NPI: 1689627085

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **RHEUMATOLOGY**

#### **KOTHA, ROSHAN**

Provider ID: 63454

Board Certified Specialty: No  
PURUSHOTHAM AND AKTHER  
KOTHA MD INC

📍 8860 CENTER DR STE 400  
LA MESA, CA 91942

☎ Phone: (619) 229-1995

Fax: (619) 229-1109

☎ After Hours Phone: (619) 229-1995

Provider Gender: Female

NPI: 1417117839

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Hindi, Spanish,  
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **SURGERY ORTHOPEDIC**

#### **BALLARD, BROOKE**

Provider ID: 262205

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

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## D. 专家名录

### MEDICAL GROUP-SD

8860 CENTER DR STE 350  
LA MESA, CA 91942

Phone: (619) 286-9480

Fax: (619) 286-4568

After Hours Phone: (619)  
286-9480

Provider Gender: Female

NPI: 1841447950

Provider English Spoken: Y

Provider Language(s)

Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO  
HOSPITAL LLC, SHARP

CORONADO HOSP AND  
HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

### LAKE ELSINORE

#### OBSTETRICS / GYNECOLOGY

##### FRANCIS, LARRY

Provider ID: 290293

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

30195 FRASER DR

LAKE ELSINORE, CA 92530

Phone: (951) 252-2720

Fax: (760) 414-3892

After Hours Phone: (951)  
252-2720

Provider Gender: Male

NPI: 1215008552

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SHARP MEMORIAL HOSPITAL,

POMONA VALLEY HOSP MED

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### OPTOMETRIST

##### GEE, JENNIFER

Provider ID: 290211

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

30195 FRASER DR

LAKE ELSINORE, CA 92530

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Provider Gender: Female

NPI: 1336589332

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

#### OPTOMETRIST

##### MORA, WENDY

Provider ID: 290239

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

30195 FRASER DR

LAKE ELSINORE, CA 92530

Phone: (951) 252-2720

Fax: (760) 414-3892

After Hours Phone: (951)  
252-2720

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**


#### **TAM, EMILY**

Provider ID: 290319

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 30195 FRASER DR  
LAKE ELSINORE, CA 92530


 Phone: (951) 525-2720


Fax: (760) 414-3892

 After Hours Phone: (951)  
525-2720

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese, Mandarin,  
Yue Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **LAKESIDE**

#### **CHIROPRACTOR**


#### **CASTRO, DAVID**

Provider ID: 305617

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 10039 VINE ST  
LAKESIDE, CA 92040


 Phone: (858) 218-3000

Fax: (360) 462-2744

 After Hours Phone: (858)  
218-3000

Provider Gender: Male

NPI: 1841557733

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

#### **CHIROPRACTOR**


#### **HOURIHAN, KEITH**

Provider ID: 257549


Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (619) 390-9975

Fax: (858) 633-4690

 After Hours Phone: (619)  
390-9975

Provider Gender: Male

NPI: 1306916994

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

#### **CHIROPRACTOR**


#### **MCCOWN, BARRY**

Provider ID: 303816

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 10039 VINE ST  
LAKESIDE, CA 92040

 Phone: (619) 390-9975

Fax: (360) 462-2744

 After Hours Phone: (619)  
390-9975

Provider Gender: Male

NPI: 1487781035

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL): Provider ID: 308229

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


### **CHIROPRACTOR**

#### **MCCOWN, BARRY**


Provider ID: 301344

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (619) 390-9975

Fax: (360) 462-2744

 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1487781035

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP

### **FAMILY PRACTICE**


#### **GUNPAT, JOSHUA**

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 10039 VINE ST

LAKESIDE, CA 92040


 Phone: (619) 390-9975

Fax: (360) 462-2744

 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1114458775

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


### **PSYCHOLOGIST**

#### **BRUNETTO, HEIDI**


Provider ID: 290407

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (619) 390-9975

Fax: (858) 633-4690

 After Hours Phone: (619) 390-9975

Provider Gender: Female

NPI: 1023250453

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **LANCASTER**

#### **CERTIFIED NURSE PRACTITIONER**

#### **JONES, TYESHIA**


Provider ID: 306079

Board Certified Specialty: No


COMMUNITY CARE IPA LLC

 43845 10TH ST W STE 1D

LANCASTER, CA 93534

 Phone: (833) 438-8763


Fax: (833) 438-8700

 After Hours Phone: (833) 438-8763

Provider Gender: Female

NPI: 1104276419

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALMDALE

REGIONAL MEDICAL CENTER,

ST BERNARDINE MED CTR,

CALIFORNIA HOSP MED CTR





LOS ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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## D. 专家名录

American Sign Language (ASL):  Accessibility: CONTACT PROVIDER  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### LOS ANGELES


#### CERTIFIED NURSE PRACTITIONER

##### **JONES, TYESHIA**

Provider ID: 306076

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1513 S GRAND AVE STE 200  
LOS ANGELES, CA 90015


 Phone: (833) 438-8763

Fax: (833) 438-8700

 After Hours Phone: (833)  
438-8763

Provider Gender: Female

NPI: 1104276419

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALMDALE

REGIONAL MEDICAL CENTER,

ST BERNARDINE MED CTR,

CALIFORNIA HOSP MED CTR

LOS ANGELES


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


#### CERTIFIED NURSE PRACTITIONER

##### **JONES, TYESHIA**

Provider ID: 306077

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1660 W 3RD ST  
LOS ANGELES, CA 90017


 Phone: (833) 438-8763

Fax: (833) 438-8700

 After Hours Phone: (833)  
438-8763

Provider Gender: Female

NPI: 1104276419

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALMDALE

REGIONAL MEDICAL CENTER,

ST BERNARDINE MED CTR,

CALIFORNIA HOSP MED CTR

LOS ANGELES

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

#### PSYCHOLOGIST

##### **CALANDRA, JOAN**


Provider ID: 289989


Board Certified Specialty: No  
BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

 11911 SAN VICENTE BLVD  
STE 280

LOS ANGELES, CA 90049

 Phone: (310) 433-7723

 After Hours Phone: (310)  
433-7723

Provider Gender: Female

NPI: 1730173865

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT


### MENIFEE

#### CERTIFIED NURSE PRACTITIONER

##### **VAHDAT, VALERIE**

Provider ID: 306581

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 26926 CHERRY HILLS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

---

BLVD STE B  
MENIFEE, CA 92586  
☎ Phone: (951) 216-2200  
☎ Fax: (858) 633-4699  
🕒 After Hours Phone: (951)  
216-2200

Provider Gender: Female

NPI: 1093474090

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PHYSICIANS ASSISTANT

---

#### SMITH, KELLI

Provider ID: 272954

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 30420 HAUN RD  
MENIFEE, CA 92584

☎ Phone: (951) 676-4193

🕒 After Hours Phone: (951)  
676-4193

Provider Gender: Female

NPI: 1841771664

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### MORENO VALLEY

---

#### OPTOMETRIST

---

#### BULLUM, ANTHONY

Provider ID: 290330

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 22675 ALESSANDRO BLVD  
MORENO VALLEY, CA  
92553

☎ Phone: (951) 571-2350

☎ Fax: (951) 571-2370

🕒 After Hours Phone: (951)  
571-2350

Provider Gender: Male

NPI: 1992773956

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### MURRIETA

---

#### ANESTHESIOLOGY

---

#### HYLTON, DIANA

Provider ID: 241738

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932527751

🗉 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### ANESTHESIOLOGY

---

#### KRAUSE, MARTIN

Provider ID: 287655

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 677-9757

After Hours Phone: (951)  
696-6000

Provider Gender: Male

NPI: 1417243239

Provider English Spoken: Y

Provider Language(s)  
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CARDIAC ELECTROPHYSIOLOGY

**HAN, FREDERICK**

Provider ID: 210100

Board Certified Specialty: No  
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS  
RD STE 104

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1427255967

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED NURSE PRACTITIONER

**HEAD, KRISTIN**

Provider ID: 268658

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE STE 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

**KLEMENCIC, TAHNEE**

Provider ID: 302627

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1134802283

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
Website: N/A  
IPA: Rady Childrens Health Network

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **CERTIFIED NURSE PRACTITIONER**

#### **MIRACLE, ANGELYN**

Provider ID: 300259

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE STE 200

MURRIETA, CA 92562

Phone: (951) 461-9300

Fax: (951) 461-9399

After Hours Phone: (951) 461-9300

Provider Gender: Female

NPI: 1144539842

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 8:30AM-0PM  
M-F 8AM-5PM

SA 8:30AM-0PM

Website: N/A

IPA: Rady Childrens Health Network

### **CERTIFIED NURSE PRACTITIONER**

#### **SNYDER, MICHELLE**

Provider ID: 210676

Board Certified Specialty: No  
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS RD STE 104

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851561054

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **STEVENSON, REHEIA**

Provider ID: 210794

Board Certified Specialty: No  
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS RD STE 104

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346696044

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **SYED-UDDIN, SUMIYAH**

Provider ID: 297771


Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

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## D. 专家名录

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124


Fax: (951) 696-6293

 After Hours Phone: (951)  
696-6124

Provider Gender: Female

NPI: 1225606478

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi, Urdu

Cultural Competency: N

Hospital Affiliation:


SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

### EMERGENCY MEDICINE


#### **LI, JINGHONG**


Provider ID: 255941

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 25500 MEDICAL CENTER  
DR


MURRIETA, CA 92562

 Phone: (951) 696-6000

 After Hours Phone: (951)  
696-6000

Provider Gender: Female

NPI: 1619014479

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### CRITICAL CARE MEDICINE

#### **BEGOVIC, ADNAN**

Provider ID: 210826

Board Certified Specialty: No

UCSD MEDICAL GROUP

 41011 CALIFORNIA OAKS  
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1093791014

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


#### CRITICAL CARE MEDICINE

#### **CHEN, KENNETH**


Provider ID: 283132

Board Certified Specialty: No

UCSD MEDICAL GROUP

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562


 Phone: (951) 696-6000


Fax: (951) 677-9757

 After Hours Phone: (951)  
696-6000

Provider Gender: Male

NPI: 1720472657

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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## D. 专家名录

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE CRITICAL CARE MEDICINE


#### **PATEL, SAGAR**

Provider ID: 283001

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

 Phone: (951) 696-6000

Fax: (951) 677-9757

 After Hours Phone: (951)  
696-6000

Provider Gender: Male

NPI: 1245672302

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

### INTERNAL MEDICINE CRITICAL CARE MEDICINE


#### **TRAN, LINH**


Provider ID: 202659

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

 Phone: (951) 696-6000

 After Hours Phone: (951)  
696-6000

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST


HEALTHCARE RANCHO  
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE CRITICAL CARE MEDICINE


#### **TRAN, LINH**

Provider ID: 210573

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 41011 CALIFORNIA OAKS  
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST


HEALTHCARE RANCHO  
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERVENTIONAL CARDIOLOGY

#### **AL KHIAMI, BELAL**

Provider ID: 275994

Board Certified Specialty: No  
UCSD MEDICAL GROUP








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## D. 专家名录



 28062 BAXTER RD  
 MURRIETA, CA 92563  
 Phone: (951) 290-4000  
 Fax: (888) 539-8781  
 After Hours Phone: (951)  
 290-4000  
 Provider Gender: Male  
 NPI: 1861623506  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Arabic  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR, PIONEERS MEMORIAL  
 HOSPITAL, EL CENTRO  
 REGIONAL MEDICAL CENTER,  
 LOMA LINDA UNIVERSITY  
 MED CTR MURRIETA,  
 TEMECULA VALLEY HOSPITAL  
 INC  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### INTERVENTIONAL CARDIOLOGY

**WETTERSTEN, NICHOLAS**  
 Provider ID: 210605  
 Board Certified Specialty: No



UCSD MEDICAL GROUP  
 41011 CALIFORNIA OAKS  
 RD STE 104  
 MURRIETA, CA 92562  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
 926-8273  
 Provider Gender: Male  
 NPI: 1063701068  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
 Provider ID: 296988  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 25170 HANCOCK AVE FL 1  
 MURRIETA, CA 92562  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711

 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hungarian,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR, RADY CHILDRENS  
 HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network, UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
 Provider ID: 296992  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 25500 MEDICAL CENTER  
 DR  
 MURRIETA, CA 92562  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

 After Hours Phone: (858) 966-6710  
Provider Gender: Female  
NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hungarian, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network, UCSD Medical Group

### MATERNAL AND FETAL MEDICINE





#### **REIMERS, REBECCA**




Provider ID: 294649  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562  
 Phone: (858) 966-6710  
Fax: (858) 966-6711  
 After Hours Phone: (858)

966-6710  
Provider Gender: Female  
NPI: 1801207634  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### MATERNAL AND FETAL MEDICINE




#### **REIMERS, REBECCA**


Provider ID: 294652  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 25500 MEDICAL CENTER DR MURRIETA, CA 92562  
 Phone: (858) 966-6710  
Fax: (858) 966-6711  
 After Hours Phone: (858) 966-6710  
Provider Gender: Female  
NPI: 1801207634  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE

#### **NYMAN, KATHERINE**

Provider ID: 301820  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 25500 MEDICAL CENTER DR MURRIETA, CA 92562  
 Phone: (951) 696-6000  
Fax: (951) 696-6105  
 After Hours Phone: (951) 696-6000

Provider Gender: Female  
NPI: 1003260951  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
Website: N/A  
IPA: Rady Childrens Health Network

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE

#### **WEISS, KATHERINE**

Provider ID: 264676

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

25500 MEDICAL CENTER DR  
MURRIETA, CA 92562

Phone: (951) 696-6000  
Fax: (951) 696-6105

After Hours Phone: (951) 696-6000

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N  
Website: N/A  
IPA: Rady Childrens Health Network

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

#### **WEST, JULIE**

Provider ID: 297071

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25500 MEDICAL CENTER DR  
MURRIETA, CA 92562

Phone: (951) 696-6000  
Fax: (951) 696-6105

After Hours Phone: (951) 696-6000

Provider Gender: Female

NPI: 1811151848

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### NEUROLOGY

#### **GOLD, JEFFREY**

Provider ID: 283334

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640  
Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### NEUROLOGY

#### **JINDAL, ANUJA**

Provider ID: 215521

Board Certified Specialty: No

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## D. 专家名录

### RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEUROLOGY

#### SAHAGIAN, MICHELLE

Provider ID: 283166

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)

600-1640

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

### NEUROLOGY CHILD

#### GOLD, JEFFREY

Provider ID: 215691

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF

### CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEUROLOGY CHILD

#### GUIDO-ESTRADA, NATALIE

Provider ID: 215442

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1528353521

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):


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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### **NEUROLOGY CHILD**


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#### **KIM MCMANUS, OLIVIA**

*Provider ID: 215666*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

 *After Hours Phone: (951) 600-1640*

*Provider Gender: Female*

*NPI: 1174870067*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation:*


*UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, CHILDRENS  
HOSPITAL OF ORANGE  
COUNTY, RADY CHILDRENS  
HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### **OBSTETRICS / GYNECOLOGY**

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#### **BINDER, PRATIBHA**

*Provider ID: 273227*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 25405 HANCOCK AVE STE  
217

MURRIETA, CA 92562

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1174758031*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD*


*MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **OPHTHALMOLOGY**

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#### **BANSAL, PREETI**


*Provider ID: 215606*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

 *After Hours Phone: (951) 600-1640*

*Provider Gender: Female*

*NPI: 1871664631*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT*

*HOSPITAL, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS, SCRIPPS*


*MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL, TRI CITY MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### **OPHTHALMOLOGY**

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#### **BHATIA, SHAGUN**

*Provider ID: 267317*

*Board Certified Specialty: No*

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## D. 专家名录

### RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1104237353

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OPHTHALMOLOGY

#### HENNEIN, LAUREN

Provider ID: 297010

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

### OPHTHALMOLOGY

#### MOLL, ANGELA

Provider ID: 215687

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OPHTHALMOLOGY

#### MOVAGHAR, MANSOOR

Provider ID: 216415

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (858) 309-7702

After Hours Phone: (858)  
309-7702

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

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## D. 专家名录


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


### OPHTHALMOLOGY


**O'HALLORAN, HENRY**

Provider ID: 215685

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### OTOLARYNGOLOGY


**BLISS, MORGAN**

Provider ID: 215684

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (951) 600-1640

 Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### OTOLARYNGOLOGY


**CARVALHO, DANIELA**

Provider ID: 215332

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562


 Phone: (951) 600-1640

 After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1154492916

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### OTOLARYNGOLOGY

**FRIESEN, TZYYNONG**

Provider ID: 244898

Board Certified Specialty: No

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## D. 专家名录

### RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562  
Phone: (951) 600-1400  
After Hours Phone: (951) 600-1400

Provider Gender: Female  
NPI: 1952740177

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### OTOLARYNGOLOGY

#### JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
After Hours Phone: (951) 600-1640

Provider Gender: Female  
NPI: 1659305753

Provider English Spoken: Y  
Provider Language(s)

Spoken: Mandarin  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### OTOLARYNGOLOGY

#### KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
After Hours Phone: (951) 600-1640

Provider Gender: Female  
NPI: 1780860536

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

### OTOLARYNGOLOGY

#### KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
After Hours Phone: (951) 600-1640

Provider Gender: Female  
NPI: 1780860536


Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS

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## D. 专家名录

HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group


### OTOLARYNGOLOGY

#### **PATEL, VIJAY**


Provider ID: 297034

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE STE 1 MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC ALLERGY / IMMUNOLOGY

#### **COLLINS, CATHLEEN**

Provider ID: 215733

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1205128089

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: LUCILE SALTER PACKARD

CHILDRENS HOSP, Stanford Health Care, RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC CARDIOLOGY

#### **BORQUEZ, ALEJANDRO**

Provider ID: 284119

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1114277787

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC CARDIOLOGY

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## D. 专家名录

### DAVIS, CHRISTOPHER

Provider ID: 215743

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1760691950

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC CARDIOLOGY

#### DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

### NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1780642280

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC CARDIOLOGY

#### MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1487821815

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC CARDIOLOGY

#### NARAYAN, HARI

Provider ID: 239114

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1376705707

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC CARDIOLOGY


#### **SAH, SERENA**

Provider ID: 215643

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (858) 966-5855

 After Hours Phone: (858)  
966-5855

Provider Gender: Female

NPI: 1295042653

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC CARDIOLOGY


#### **SILVA SEPULVEDA, JOSE**

Provider ID: 215679

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC CARDIOLOGY


#### **WILLIAMS, MATTHEW**

Provider ID: 215678

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1831423250

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSF BENIOFF CHILDREN'S  
HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **DEVERA, GEMMIE**



Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

 25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562


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## D. 专家名录


 Phone: (951) 696-6124  
 After Hours Phone: (951) 696-6124


Provider Gender: Female  
NPI: 1366622078

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE


#### **DO, STEPHANIE**

Provider ID: 216969


Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25500 MEDICAL CENTER DR  
MURRIETA, CA 92562

 Phone: (951) 696-6124  
Fax: (951) 696-6293


 After Hours Phone: (951) 696-6124

Provider Gender: Female  
NPI: 1750513644

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE

#### **GROSS, MATTHEW**

Provider ID: 297173


Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

 Phone: (858) 966-7800  
Fax: (858) 966-8231

 After Hours Phone: (858) 966-7800


Provider Gender: Male  
NPI: 1942223664

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A


IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE

#### **INDRA, SEAN**

Provider ID: 302626


Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25500 MEDICAL CENTER DR  
MURRIETA, CA 92562

 Phone: (951) 696-6124  
Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124




Provider Gender: Male  
NPI: 1427349091

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Medi-Cal Open Panel: No  
Min/Max Age: 0\19







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## D. 专家名录

American Sign Language (ASL):  Hours: SU 1PM-10PM  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE






#### **KINGDON, JOANNA**

Provider ID: 302318  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 25170 HANCOCK AVE STE  
150  
MURRIETA, CA 92562  
 Phone: (858) 966-7800  
Fax: (858) 966-8231  
 After Hours Phone: (858)  
966-7800  
Provider Gender: Female  
NPI: 1609495399  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE







#### **MESIWALA, ADNAN**

Provider ID: 275655  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562  
 Phone: (951) 696-6161  
Fax: (951) 696-6105  
 After Hours Phone: (951)  
696-6161  
Provider Gender: Male  
NPI: 1528483955  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health

Network

### PEDIATRIC EMERGENCY MEDICINE

#### **MILLS, DAVID**

Provider ID: 302147  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562  
 Phone: (951) 696-6124  
Fax: (951) 696-6293  
 After Hours Phone: (951)  
696-6124  
Provider Gender: Male  
NPI: 1194145946  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **OZCAN, ALI**

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## D. 专家名录

Provider ID: 287924

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951)  
696-6124

Provider Gender: Male

NPI: 1265867683

Provider English Spoken: Y

Provider Language(s)  
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, LOMA LINDA  
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **PARK, BRIAN**

Provider ID: 302353

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951)  
696-6124

Provider Gender: Male

NPI: 1710418744

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST  
HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **RANASURIYA, DUNISHA**

Provider ID: 216972

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

Phone: (951) 696-6161

After Hours Phone: (951)  
696-6161

Provider Gender: Female

NPI: 1740468057

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **SCHROTER, STEPHANIE**

Provider ID: 243831

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

Phone: (951) 696-6124

After Hours Phone: (951)  
696-6124

Provider Gender: Female

NPI: 1073951828




Provider English Spoken: Y

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## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19




American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE

#### **SHETH, SARIKA**

Provider ID: 248172  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562  
 Phone: (951) 696-6124  
Fax: (951) 696-6293  
 After Hours Phone: (951)  
696-6124


Provider Gender: Female  
NPI: 1336503234

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **SOUDER, CHRISTOPHER**

Provider ID: 301634  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **TANG, ANDREW**

Provider ID: 294678


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562


 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)  
696-6124

Provider Gender: Male

NPI: 1184071516

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **TRAN, THERESA**

Provider ID: 301835

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

25500 MEDICAL CENTER DR  
MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951) 696-6124

Provider Gender: Female

NPI: 1417496985

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC ENDOCRINOLOGY**

#### **SINGH, PUJA**

Provider ID: 302819

Board Certified Specialty: No

RADY CHILDRENS HEALTH

### **NETWORK**

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1841721172

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC**

### **GASTROENTEROLOGY**

#### **CHU, CHRISTOPHER**

Provider ID: 301640

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)

600-1640

Provider Gender: Male

NPI: 1912369273

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **LENHART-PENDERGRASS, PATRICIA**

Provider ID: 294382

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760






After Hours Phone: (951) 600-1640

Provider Gender: Female






NPI: 1144615659





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## D. 专家名录










 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
 *American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **PEDIATRIC PULMONOLOGY**

**RAO, APARNA**  
*Provider ID: 215528*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 25170 HANCOCK AVE  
MURRIETA, CA 92562  
 *Phone: (951) 600-1640*  
*Fax: (951) 600-1760*  
 *After Hours Phone: (951) 600-1640*  
*Provider Gender: Female*  
*NPI: 1649222340*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Hindi*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*










*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
 *American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **PEDIATRICS**

**LOPEZ, XIMENA**  
*Provider ID: 302857*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
 *Phone: (951) 600-1640*  
*Fax: (951) 600-1760*  
 *After Hours Phone: (951) 600-1640*  
*Provider Gender: Female*  
*NPI: 1740316405*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
 *American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: Rady Childrens Health Network*

### **PEDIATRICS**

**NGO, MAI**  
*Provider ID: 302112*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 25170 HANCOCK AVE STE 1  
MURRIETA, CA 92562  
 *Phone: (951) 600-1640*  
*Fax: (951) 600-1760*  
 *After Hours Phone: (951) 600-1640*  
*Provider Gender: Female*  
*NPI: 1508910787*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, MEDICAL CTR AT UCSF, RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
 *American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PEDIATRICS

#### **PATTERSON, MARY**

Provider ID: 215677

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1912112020

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRICS

#### **VARGAS TRUJILLO, MARCELA**

Provider ID: 215602

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1952534091

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PHYSICAL MEDICINE / REHABILITATION

#### **ALGRA, JEFFREY**

Provider ID: 215644

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1457664518

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PHYSICAL MEDICINE / REHABILITATION

#### **BIFFL, SUSAN**

Provider ID: 283113

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1366589640

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

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## D. 专家名录

CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---


### PHYSICAL MEDICINE / REHABILITATION

**DALAL, PRITHA**

Provider ID: 215665

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1609017532

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---


### PHYSICAL MEDICINE / REHABILITATION

**RYAN, KYLE**


Provider ID: 275662

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1447645742

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---


### PHYSICAL MEDICINE / REHABILITATION

**SCOTT-WYARD, PHOEBE**

Provider ID: 283086

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
CHILDRENS HOSP OF LOS  
ANGELES, RADY CHILDRENS  
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### PHYSICAL MEDICINE / REHABILITATION

**SKALSKY, ANDREW**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

Provider ID: 215522

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PHYSICIANS ASSISTANT

#### ANWAR, YASMIN

Provider ID: 300845

Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP

25495 MEDICAL CENTER  
DR STE 200

MURRIETA, CA 92562

Phone: (951) 304-7546

Fax: (951) 696-5872

After Hours Phone: (951)  
304-7546

Provider Gender: Female

NPI: 1588602247

Provider English Spoken: Y

Provider Language(s)  
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### KIVIAT, ANNETTE

Provider ID: 302453

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PULMONARY DISEASES

#### KUMAR, AVNEE

Provider ID: 300014

Board Certified Specialty: No  
UCSD MEDICAL GROUP

25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750745394

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

### **PULMONARY DISEASES**

#### **SURI, RAJAT**

Provider ID: 283350

Board Certified Specialty: No  
UCSD MEDICAL GROUP

25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)  
677-1111

Provider Gender: Male

NPI: 1144615337

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **SURGERY GENERAL**

#### **FAIRBANKS, TIMOTHY**

Provider ID: 246979

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

### **NETWORK**

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1407010556

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY GENERAL**

#### **KLING, KAREN**

Provider ID: 215583

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE

MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,  
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, NATIONAL

NAVAL MED CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY GENERAL**

### **VASCULAR**

#### **HOWE, STEVEN**

Provider ID: 206761

Board Certified Specialty: No  
UCSD MEDICAL GROUP

28062 BAXTER RD



MURRIETA, CA 92563

Phone: (877) 558-6248

After Hours Phone: (877)

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

558-6248  
Provider Gender: Male  
NPI: 1497702740  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, TRI CITY  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### **SURGERY ORTHOPEDIC**

**CHENG, YU-TSUN**  
Provider ID: 301902  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562  
 Phone: (951) 600-1640  
Fax: (951) 600-1760  
 After Hours Phone: (951)  
600-1640




Provider Gender: Male  
NPI: 1992982854  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### **SURGERY ORTHOPEDIC**

**UPASANI, VIDYADHAR**  
Provider ID: 283160  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
 Phone: (951) 600-1640  
Fax: (951) 600-1760  
 After Hours Phone: (951)  
600-1640





Provider Gender: Male  
NPI: 1548417652  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### **SURGERY PEDIATRIC**

**THANGARAJAH, HARIHARAN**  
Provider ID: 215420  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 25170 HANCOCK AVE  
MURRIETA, CA 92562  
 Phone: (951) 600-1640  
 After Hours Phone: (951)  
600-1640

Provider Gender: Male  
NPI: 1598979593  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health Network

### **SURGERY THORACIC**

#### **HOWE, STEVEN**

Provider ID: 210169

Board Certified Specialty: No  
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS RD STE 104  
MURRIETA, CA 92562

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **SURGERY THORACIC**

#### **POLLEMA, TRAVIS**

Provider ID: 210577

Board Certified Specialty: No  
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS RD STE 104  
MURRIETA, CA 92562

Phone: (858) 657-7777  
Fax: (888) 539-8781

After Hours Phone: (858) 657-7777

Provider Gender: Male

NPI: 1871752956

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **NATIONAL CITY**

#### **CERTIFIED NURSE PRACTITIONER**

#### **CUNNINGHAM, ISIS**

Provider ID: 302115

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

655 EUCLID AVE STE 205

NATIONAL CITY, CA 91950

Phone: (619) 470-1945  
Fax: (619) 475-5048

After Hours Phone: (619) 470-1945

Provider Gender: Female

NPI: 1770124927

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### **CERTIFIED NURSE PRACTITIONER**

#### **DE CASTRO, SHARLENE**

Provider ID: 299158

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (844) 200-2426  
Fax: (619) 339-5657

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1750019824

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-6PM  
F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**DRISCOLL, SUSAN**

Provider ID: 301774

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 340 E 8TH ST  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100  
Fax: (619) 259-2807

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**DRISCOLL, SUSAN**

Provider ID: 301775

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 330 E 8TH ST  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100  
Fax: (619) 259-2807

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**

---


**GULLY, MICHELLE**


Provider ID: 299422

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 1428 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426  
Fax: (619) 434-1613

 After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1801557947

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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### **CERTIFIED NURSE** **PRACTITIONER**


---

**LIM, IMELDA**

Provider ID: 294308

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950


 Phone: (844) 200-2426  
Fax: (619) 474-3919

 After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1093130395


 Provider English Spoken: Y

 Provider Language(s)

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## D. 专家名录

Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

 Website: N/A

IPA: Community Care IPA LLC

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### **CERTIFIED NURSE PRACTITIONER**

#### **MIDORO, ABEGAILLE**

Provider ID: 303830

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2835 HIGHLAND AVE STE A  
NATIONAL CITY, CA 91950


 Phone: (844) 200-2426


Fax: (619) 477-1286

 After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

 Website: N/A

IPA: Community Care IPA LLC

---


### **CERTIFIED NURSE PRACTITIONER**

#### **MIDORO, ABEGAILLE**

Provider ID: 303827

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2835 HIGHLAND AVE STE B  
NATIONAL CITY, CA 91950


 Phone: (844) 200-2426

Fax: (619) 477-2628

 After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

 Website: N/A

IPA: Community Care IPA LLC

---


### **CERTIFIED NURSE PRACTITIONER**

#### **NOVENO, HILARIO JR**

Provider ID: 297836

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426


Fax: (619) 474-4008

 After Hours Phone: (844)  
200-2426

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,  
UCSD Medical Group

---

### **CHIROPRACTOR**

#### **GILIBERTO, JOSEPH**



Provider ID: 291548



Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2835 HIGHLAND AVE


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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NATIONAL CITY, CA 91950  
 Phone: (844) 200-2426  
 Fax: (619) 399-5959  
 After Hours Phone: (844) 200-2426  
 Provider Gender: Male  
 NPI: 1821463159

 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish

Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### DERMATOLOGY


#### LIN, SHINKO

Provider ID: 308216

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

 655 EUCLID AVE STE 304  
 NATIONAL CITY, CA 91950


 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619) 267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### DERMATOLOGY


#### LIN, SHINKO

Provider ID: 306319


Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

 655 EUCLID AVE STE 304  
 NATIONAL CITY, CA 91950


 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619) 267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
 8:30AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP


### FAMILY PRACTICE

#### NAVARRO, VANESSA MARIA

Provider ID: 301784

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST  
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


Fax: (619) 259-2807

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s) Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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## D. 专家名录


 Website: N/A  
IPA: IHP of Southern Cal-PHP

### FAMILY PRACTICE

#### **ROBERTS, POMAI**

Provider ID: 301278  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 1136 D AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100  
Fax: (619) 474-3722

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1023278314

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY

#### **CAMACHO, BENJAMIN**

Provider ID: 35045

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD


 1615 SWEETWATER RD  
NATIONAL CITY, CA 91950


 Phone: (619) 474-2233  
Fax: (619) 474-2211

 After Hours Phone: (619)  
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD


### INTERVENTIONAL CARDIOLOGY


#### **CAMACHO, BENJAMIN**

Provider ID: 290137

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1615 SWEETWATER RD STE  
D  
NATIONAL CITY, CA 91950


 Phone: (619) 474-2233  
Fax: (619) 474-2211

 After Hours Phone: (619)  
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

### INTERVENTIONAL CARDIOLOGY

#### **CAMACHO, BENJAMIN**

Provider ID: 269129

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1615 SWEETWATER RD

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## D. 专家名录

NATIONAL CITY, CA 91950

☎ Phone: (619) 474-2233

Fax: (619) 474-2211

📞 After Hours Phone: (619) 474-2233

Provider Gender: Male

NPI: 1699759936

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

### INTERVENTIONAL CARDIOLOGY

#### **DAMANI, SAMIR**

Provider ID: 303098

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 655 EUCLID AVE STE 401  
NATIONAL CITY, CA 91950

☎ Phone: (858) 800-2480

Fax: (858) 216-1908

📞 After Hours Phone: (858) 800-2480

Provider Gender: Male

NPI: 1457379372

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY

#### **PANDHI, JAY**

Provider ID: 269087

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 655 EUCLID AVE STE 208  
NATIONAL CITY, CA 91950

☎ Phone: (619) 512-1915

Fax: (619) 512-1913

📞 After Hours Phone: (619) 512-1915

Provider Gender: Male

NPI: 1407997406

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **ROUGH, STEVEN**

Provider ID: 301320

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 1415 E 8TH ST STE 6  
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-4288

Fax: (619) 434-4315

📞 After Hours Phone: (619) 434-4288

Provider Gender: Male

NPI: 1386821460

☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,  
ALVARADO HOSP MED CTR


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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD


### INTERVENTIONAL CARDIOLOGY

#### **ROUGH, STEVEN**

Provider ID: 302044

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1415 E 8TH ST STE 6  
NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)  
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

ALVARADO HOSP MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD


### INTERVENTIONAL CARDIOLOGY

#### **ROUGH, STEVEN**

Provider ID: 302043

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

 1415 E 8TH ST STE 6  
NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)  
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


SHARP MEMORIAL HOSPITAL,


ALVARADO HOSP MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): DIEGO, KINDRED HOSPITAL

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD


### NEPHROLOGY

#### **COMUNALE, RODERICK**

Provider ID: 290784

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 502 EUCLID AVE STE 205  
NATIONAL CITY, CA 91950

 Phone: (858) 551-0276

Fax: (858) 454-8796

 After Hours Phone: (858)  
551-0276

Provider Gender: Male

NPI: 1568462109

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, PARADISE

VALLEY HOSPITAL,

ALVARADO HOSPITAL LLC,

SCRIPPS MERCY HOSPITAL,

ALVARADO HOSP MED CTR,

KINDRED HOSPITAL SAN

DIEGO, KINDRED HOSPITAL

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## D. 专家名录

*SAN DIEGO, SELECT  
SPECIALTY HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 21\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP*

### **OBSTETRICS / GYNECOLOGY**

**ASLIAN, AZITA**  
*Provider ID: 301797  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1136 D AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 662-4100  
Fax: (619) 336-2323  
After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1851667661  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Fataleka  
Cultural Competency: N  
Hospital Affiliation: Hemet  
Global Medical Center, Menifee  
Global Medical Center,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MERCY HOSPITAL  
Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP*

### **OBSTETRICS / GYNECOLOGY**

**DEL ROSARIO, GELEN**  
*Provider ID: 257478  
Board Certified Specialty: No  
BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT  
502 EUCLID AVE STE 300  
NATIONAL CITY, CA 91950  
Phone: (619) 475-1261  
Fax: (619) 475-1267  
After Hours Phone: (619)  
475-1261  
Provider Gender: Female  
NPI: 1255643474  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT*

*PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,  
Community Care IPA LLC,  
Rady Childrens Health  
Network*

### **OBSTETRICS / GYNECOLOGY**

**DEL ROSARIO, GELEN**  
*Provider ID: 269247  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
502 EUCLID AVE STE 300  
NATIONAL CITY, CA 91950  
Phone: (619) 475-1261  
Fax: (619) 475-1267  
After Hours Phone: (619)  
475-1261  
Provider Gender: Female  
NPI: 1255643474  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A*

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## D. 专家名录

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,  
Community Care IPA LLC,  
Rady Childrens Health  
Network

### **OBSTETRICS / GYNECOLOGY**

#### **DEL ROSARIO, GELEN**

Provider ID: 206092

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 502 EUCLID AVE STE 300  
NATIONAL CITY, CA 91950

☎ Phone: (619) 475-1261

Fax: (619) 475-1267

🕒 After Hours Phone: (619)  
475-1261

Provider Gender: Female

NPI: 1255643474

🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,

Community Care IPA LLC,  
Rady Childrens Health  
Network

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

Provider ID: 302451

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 2400 E 8TH ST STE 8  
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

🕒 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1811162456

🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

#### **HAIGHT, BRUCE**

Provider ID: 269113

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

🕒 After Hours Phone: (800)  
898-2020

Provider Gender: Male

NPI: 1427029628

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **AOTO, KIM**

Provider ID: 268722

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 2240 E PLAZA BLVD STE  
F-G

NATIONAL CITY, CA 91950

☎ Phone: (800) 898-2020

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Fax: (844) 897-3788

☎ After Hours Phone: (800) 898-2020

Provider Gender: Female

NPI: 1780935650

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 304538

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KOO, ANITA**

Provider ID: 306903

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 1520 E PLAZA BLVD  
NATIONAL CITY, CA 91950

☎ Phone: (619) 425-7755

Fax: (619) 425-2138

☎ After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 307113

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KOO, ANITA**

Provider ID: 304538

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 1520 E PLAZA BLVD  
NATIONAL CITY, CA 91950

☎ Phone: (619) 425-7755

Fax: (619) 425-2138

☎ After Hours Phone: (619) 425-7755

Provider Gender: Female

NPI: 1669825667

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KOO, ANITA**

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎ Phone: (619) 474-2284

Fax: (619) 474-3919

☎ After Hours Phone: (619) 474-2284

Provider Gender: Female

NPI: 1669825667

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KOO, ANITA**

Provider ID: 307171

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎ Phone: (619) 474-2284

Fax: (619) 474-3919


☎ After Hours Phone: (619) 474-2284

Provider Gender: Female


NPI: 1669825667


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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **PODIATRIST**

#### **ATMAR, AKMAL**

Provider ID: 269784

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2345 E 8TH ST STE 105  
NATIONAL CITY, CA 91950


 Phone: (929) 287-4511

Fax: (877) 671-6835

 After Hours Phone: (929)  
287-4511

Provider Gender: Male

NPI: 1558656637

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi, Urdu

Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### **PODIATRIST**

#### **CAINE, SAMUEL**


Provider ID: 308212

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 610 EUCLID AVE STE 301  
NATIONAL CITY, CA 91950

 Phone: (619) 292-2493

Fax: (619) 618-0222

 After Hours Phone: (619)  
292-2493

Provider Gender: Male

NPI: 1396230298

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND


HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### **PODIATRIST**

#### **DAVIDSON III, JOHN**

Provider ID: 129542

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 610 EUCLID AVE STE 301  
NATIONAL CITY, CA 91950

 Phone: (619) 427-3481

Fax: (619) 420-7807

 After Hours Phone: (619)  
427-3481

Provider Gender: Male

NPI: 1689069874

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC

### **PULMONARY DISEASES**

#### **LIM, ROSEMARIE**

Provider ID: 262224

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

610 EUCLID AVE STE 202  
NATIONAL CITY, CA 91950  
Phone: (619) 472-4900  
Fax: (619) 472-4910

After Hours Phone: (619)  
472-4900

Provider Gender: Female  
NPI: 1841303419

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Chinese, Mandarin,  
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-4:30PM

Website: N/A

IPA: Imperial Health Holdings  
Medical Group-SD

### REGISTERED PHYSICAL

### THERAPIST

**CHENG, BRANDON**

Provider ID: 304531

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 7AM-7PM  
F 7AM-5PM

SA 8AM-1PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL

### THERAPIST

**JIMENEZ, ANDREA**

Provider ID: 299888

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL

### THERAPIST

**KARANDE, PRACHI**

Provider ID: 287102

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **REGISTERED PHYSICAL THERAPIST**

#### **NGUYEN, TIA**

Provider ID: 305011

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1457136269


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM  
F 7AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **REGISTERED PHYSICAL THERAPIST**

#### **NGUYEN, TIA**

Provider ID: 305012

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1457136269

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM  
F 7AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **REGISTERED PHYSICAL THERAPIST**

#### **NOVENCIDO, ANDREW**

Provider ID: 301996

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **REGISTERED PHYSICAL THERAPIST**

#### **NOVENCIDO, ANDREW**

Provider ID: 286784

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL): IPA: Community Care IPA LLC,  
N  
IHP of Southern Cal-PHP

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### REGISTERED PHYSICAL THERAPIST

#### **SPARKS, TODD**

Provider ID: 301110

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950


 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1265481139

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 7AM-7PM

TU 7AM-0PM

W-TH 7AM-7PM

F 7AM-0PM

 Website: N/A


### REGISTERED PHYSICAL THERAPIST

#### **SUGGS, SARAH**

Provider ID: 298366

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1083353650

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### REGISTERED PHYSICAL THERAPIST

#### **SUGGS, SARAH**

Provider ID: 301430

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1083353650


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### REGISTERED PHYSICAL THERAPIST

#### **VILLANUEVA, GIOVANNI**

Provider ID: 301533

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Male


NPI: 1063046878

 Provider English Spoken: Y

 Provider Language(s)

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## D. 专家名录




Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 7AM-7PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### OCEANSIDE

#### ANESTHESIOLOGY PAIN MANAGEMENT






##### **BROWNLOW, ROY**



Provider ID: 308111  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 2125 S EL CAMINO REAL  
STE 103  
OCEANSIDE, CA 92054  
 Phone: (760) 610-0522  
Fax: (760) 610-0523  
 After Hours Phone: (760)  
610-0522  
Provider Gender: Male  
NPI: 1205949914  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP

AND HEALTHCARE CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

#### ANESTHESIOLOGY PAIN MANAGEMENT

##### **DAIRO, BRANDON**

Provider ID: 299882  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 3231 WARING CT STE K  
OCEANSIDE, CA 92056  
 Phone: (760) 607-5350  
 After Hours Phone: (760)  
607-5350  
Provider Gender: Male  
NPI: 1689092470  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\100  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### CERTIFIED ACUPUNCTURIST

##### **GONZALEZ, ANDRES**

Provider ID: 308047  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 3988 VISTA WAY STE G  
OCEANSIDE, CA 92056  
 Phone: (760) 736-6767  
Fax: (760) 736-6744  
 After Hours Phone: (760)  
736-6767  
Provider Gender: Male  
NPI: 1841857729  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE

#### PRACTITIONER

##### **APRIL, MONIQUE**

Provider ID: 306979

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## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**APRIL, MONIQUE**

Provider ID: 306978

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**BAE, JINYI**

Provider ID: 298197

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

619 CROUCH ST STE 100  
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1871154526

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\64

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**BALDWIN, ANDREA**

Provider ID: 294937

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1497202121

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM  
W 8AM-7PM

TH-F 8AM-5PM  
SA 9AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

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## D. 专家名录

### **BINETTE, DONYA**

Provider ID: 303861

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2210 MESA DR STE 300  
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### **CERTIFIED NURSE PRACTITIONER**

### **CHILAKA, SAMUEL**

Provider ID: 301314

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### **CERTIFIED NURSE PRACTITIONER**

### **CHILAKA, SAMUEL**

Provider ID: 301315

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### **CERTIFIED NURSE PRACTITIONER**

### **CHILAKA, SAMUEL**

Provider ID: 301313

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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### **CERTIFIED NURSE** **PRACTITIONER**


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#### **CHRISTY, TYLER**

Provider ID: 303931

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **CHRISTY, TYLER**


Provider ID: 303930

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **CHRISTY, TYLER**

Provider ID: 307299

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **CISZEK, ALEXANDRA**

Provider ID: 306002

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 605 CROUCH ST  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1578220612

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **GENOVESE, KELLY**

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## D. 专家名录

Provider ID: 301304  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 5  
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1326052457

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

#### **HARRIS, PAMELA**

Provider ID: 302289

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

#### **HARRIS, PAMELA**

Provider ID: 302290

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

#### **HEAD, KRISTIN**

Provider ID: 268660

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **CERTIFIED NURSE PRACTITIONER**

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## D. 专家名录

### **HERNANDEZ, JESSICA**

Provider ID: 302299

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### **CERTIFIED NURSE PRACTITIONER**

### **HERNANDEZ, JESSICA**

Provider ID: 302300

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### **CERTIFIED NURSE PRACTITIONER**

### **HERNANDEZ, JESSICA**

Provider ID: 302298

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### **CERTIFIED NURSE PRACTITIONER**

### **HERNANDEZ, JESSICA**

Provider ID: 304495

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### **CERTIFIED NURSE PRACTITIONER**

### **HERNANDEZ, JESSICA**

Provider ID: 304494

Board Certified Specialty: No

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## D. 专家名录

### COMMUNITY CARE IPA LLC

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### HUERTA, STEVEN

Provider ID: 307935

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### HUERTA, STEVEN

Provider ID: 307932

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### HUERTA, STEVEN

Provider ID: 307934

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### KELLEHER, BRIDGET

Provider ID: 298081

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000


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## D. 专家名录

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Network

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health

Network

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### **CERTIFIED NURSE** **PRACTITIONER**


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#### **KELLEHER, BRIDGET**

Provider ID: 298082

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Network

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health

---

### **CERTIFIED NURSE** **PRACTITIONER**


---


#### **KELLEHER, BRIDGET**

Provider ID: 298084

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Network

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health

Network

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **LANG, LESLIE**

Provider ID: 308045

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457366130

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **MONTGOMERY, KEITH ALLEN**

Provider ID: 295287

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## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM  
W 10AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **MONTGOMERY, KEITH ALLEN**

Provider ID: 295285

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM  
W 10AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **MONTGOMERY, KEITH ALLEN**

Provider ID: 295286

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Hours: M-TU 8AM-5PM  
W 10AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **PRITZKER, JOELY**

Provider ID: 239772

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1619384351

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC

### CERTIFIED NURSE


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## D. 专家名录

<b>PRACTITIONER</b>		
<b>RAYTA, NICOLE</b> Provider ID: 304682 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 517 N HORNE ST OCEANSIDE, CA 92054 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Provider Gender: Female NPI: 1689027542 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP	547-1000 Provider Gender: Female NPI: 1548987985 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network	Spoken: Spanish Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM SA 9AM-4PM Website: N/A IPA: Community Care IPA LLC
<b>CERTIFIED NURSE PRACTITIONER</b>		
<b>TAYLOR, CHRISTOPHER</b> Provider ID: 295505 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 4700 N RIVER RD OCEANSIDE, CA 92057 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Provider Gender: Male NPI: 1851747166 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 12\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-2PM SA 9AM-4PM	<b>CERTIFIED NURSE PRACTITIONER</b> <b>SANTIAGO, AMANDA</b> Provider ID: 242607 Board Certified Specialty: No COMMUNITY CARE IPA LLC 4700 N RIVER RD OCEANSIDE, CA 92057 Phone: (760) 631-5000 Fax: (760) 414-3892 After Hours Phone: (760) 631-5000 Provider Gender: Female NPI: 1619488731 Provider English Spoken: Y Provider Language(s)	
<b>CERTIFIED NURSE PRACTITIONER</b>		
<b>SANACORA, RACHEL</b> Provider ID: 297730 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056 Phone: (760) 547-1000 Fax: (760) 547-1021 After Hours Phone: (760)		

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## D. 专家名录





 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **TAYLOR, CHRISTOPHER**

Provider ID: 295503  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Male  
NPI: 1851747166  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-2PM  
SA 9AM-4PM



 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **TAYLOR, CHRISTOPHER**


Provider ID: 295506  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892


 After Hours Phone: (760)  
631-5000

Provider Gender: Male  
NPI: 1851747166

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-2PM  
SA 9AM-4PM



 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

---


### **CERTIFIED REGISTERED** **NURSE MIDWIFE**

---

#### **KELLY, KATHERINE**

Provider ID: 290312  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 2210 MESA DR STE 5  
OCEANSIDE, CA 92054  
 Phone: (760) 757-5841  
Fax: (760) 736-8740

 After Hours Phone: (760)



757-5841  
Provider Gender: Female  
NPI: 1801134275  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PALOMAR  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


---

### **CERTIFIED REGISTERED** **NURSE MIDWIFE**



---

#### **PERLMAN, TAMARA**

Provider ID: 290733  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 2210 MESA DR STE 5  
OCEANSIDE, CA 92054  
 Phone: (760) 757-5841  
Fax: (760) 736-8740

 After Hours Phone: (760)  
757-5841

Provider Gender: Female  
NPI: 1730274374

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY

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## D. 专家名录


### MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: IHP of Southern Cal-PHP

Provider ID: 290221

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1972883882

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

NPI: 1811423072

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### CHIROPRACTOR

#### ANDREWS, BRAD

Provider ID: 290542

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 619 CROUCH ST  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767  
Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Male


NPI: 1750791745

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### EMERGENCY MEDICINE


#### PHAM, LILY

Provider ID: 304934

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1000  
Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1000

Provider Gender: Female


### FAMILY PRACTICE

#### SALAMANCA, OMAR

Provider ID: 295469

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 605 CROUCH ST  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767  
Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1083000947

Provider English Spoken: Y




Provider Language(s)  
Spoken: Spanish

### CHIROPRACTOR

#### JU, NATHANIEL


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## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: KERN MEDICAL CENTER*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 14\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-4:30PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### **GASTROENTEROLOGY**




#### **NOVO, MEGAN**

*Provider ID: 308044*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 3923 WARING RD STE A  
OCEANSIDE, CA 92056  
 *Phone: (760) 724-8782*  
*Fax: (760) 842-7801*  
 *After Hours Phone: (760) 724-8782*  
*Provider Gender: Female*  
*NPI: 1770961971*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL*




*CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-4:30PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### **GYNECOLOGIC ONCOLOGY**

#### **ESKANDER, RAMEZ**






*Provider ID: 282166*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4002 VISTA WAY  
OCEANSIDE, CA 92056  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1144486929*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR,*

*Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **INTERNAL MEDICINE**

#### **SHABANIAN, LEILA**

*Provider ID: 307537*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
*Provider Gender: Female*  
*NPI: 1013963073*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*

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## D. 专家名录

Spoken: Farsi, French  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, TRI CITY MEDICAL CTR,  
 PALOMAR HEALTH, SCRIPPS  
 MERCY HOSPITAL, PALOMAR  
 MEDICAL CENTER  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

MERCY HOSPITAL CHULA  
 VISTA, TRI CITY MEDICAL CTR,  
 PALOMAR HEALTH, SCRIPPS  
 MERCY HOSPITAL, PALOMAR  
 MEDICAL CENTER  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TU 8AM-5PM  
 W 8AM-7PM  
 TH-F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR, RADY CHILDRENS  
 HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network, UCSD Medical Group

### INTERNAL MEDICINE

#### SHABANIAN, LEILA

Provider ID: 307215  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 818 PIER VIEW WAY  
 OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Female  
 NPI: 1013963073  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi, French  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS

### MATERNAL AND FETAL MEDICINE

#### MELBER, DORA

Provider ID: 296991  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 3605 VISTA WAY STE 172  
 OCEANSIDE, CA 92056  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711  
 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hungarian,

### MATERNAL AND FETAL MEDICINE

#### REIMERS, REBECCA

Provider ID: 294651  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 3605 VISTA WAY STE 172  
 OCEANSIDE, CA 92056  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711  
 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1801207634  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY

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## D. 专家名录

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

Grossmont Hospital, Sharp

Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### MATERNAL AND FETAL MEDICINE

**RICHARDSON, ALVIE**

Provider ID: 264686

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Sharp Grossmont  
Hospital

Medi-Cal Open Panel: Yes


### MATERNAL AND FETAL MEDICINE

**SCHWENDEMANN, WADE**

Provider ID: 205437

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Male

NPI: 1477563302

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS, TRI CITY  
MEDICAL CTR, Sharp


### MATERNAL AND FETAL MEDICINE

**WESTERMANN, MELISSA**

Provider ID: 255793

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1760730758




 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
EARL AND LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,

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## D. 专家名录


UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, SHARP  
MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **MATERNAL AND FETAL MEDICINE**

#### **WILLIAMS, KRISTIN**

Provider ID: 206230  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (858) 966-6710  
Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710


Provider Gender: Female

NPI: 1992847131

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,  
SAN MATEO MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, TRI CITY  
MEDICAL CTR, CALIFORNIA  
PACIFIC MED CTR,  
CALIFORNIA PACIFIC MED  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network

### **NEPHROLOGY**

#### **LIU, ANDREW**

Provider ID: 301573  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 3300 VISTA WAY  
OCEANSIDE, CA 92056





 Phone: (760) 967-9900  
Fax: (760) 967-6769

 After Hours Phone: (760)  
967-9900

Provider Gender: Male

NPI: 1710481866

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Chinese, Mandarin  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **NEPHROLOGY**

#### **LIU, ANDREW**

Provider ID: 305443  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 3300 VISTA WAY STE B  
OCEANSIDE, CA 92056

 Phone: (760) 967-9900  
Fax: (760) 967-6769

 After Hours Phone: (760)  
967-9900

Provider Gender: Male

NPI: 1710481866

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### NEUROLOGY


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#### JINDAL, ANUJA

Provider ID: 206266

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

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### NEUROLOGY CHILD


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#### SAHAGIAN, MICHELLE

Provider ID: 206075

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

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### OBSTETRICS / GYNECOLOGY

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#### BINDER, PRATIBHA

Provider ID: 273226

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4002 VISTA WAY  
OCEANSIDE, CA 92056

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### OPHTHALMOLOGY


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#### BANSAL, PREETI

Provider ID: 205619

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (960) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (960)  
547-1020

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female  
NPI: 1871664631  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MARY  
BIRCH HOSP FOR WOMEN  
AND NEWBORNS, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL, TRI CITY MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **OPHTHALMOLOGY**

#### **BHATIA, SHAGUN**

Provider ID: 267318  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 Phone: (760) 547-1020  
Fax: (760) 547-1021  
 After Hours Phone: (760)

547-1020  
Provider Gender: Female  
NPI: 1104237353  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **OPHTHALMOLOGY**

#### **HENNEIN, LAUREN**

Provider ID: 297013  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 Phone: (760) 547-1020  
Fax: (760) 547-1021  
 After Hours Phone: (760)  
547-1020  
Provider Gender: Female  
NPI: 1699216010  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network




### **OPHTHALMOLOGY**

#### **JACOBSEN, BRADLEY**

Provider ID: 302868  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP  
 3231 WARING CT STE S  
OCEANSIDE, CA 92056  
 Phone: (760) 631-6144  
Fax: (760) 724-3920  
 After Hours Phone: (760)  
631-6144  
Provider Gender: Male  
NPI: 1760845184  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N






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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### OPHTHALMOLOGY








#### **MOLL, ANGELA**

*Provider ID: 205509*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 *Phone: (760) 547-1020*  
*Fax: (760) 547-1021*  
 *After Hours Phone: (760) 547-1020*  
*Provider Gender: Female*  
*NPI: 1861648602*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT*

*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### OPHTHALMOLOGY








#### **MOVAGHAR, MANSOOR**

*Provider ID: 216416*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 *Phone: (760) 547-1020*  
 *After Hours Phone: (760) 547-1020*  
*Provider Gender: Male*  
*NPI: 1497792220*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*  

---


### OPHTHALMOLOGY

#### **O'HALLORAN, HENRY**

*Provider ID: 205887*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 *Phone: (760) 547-1020*  
*Fax: (760) 547-1021*  
 *After Hours Phone: (760) 547-1020*  
*Provider Gender: Male*  
*NPI: 1235287947*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### OPHTHALMOLOGY

#### **SHEILS, CATHERINE**

*Provider ID: 305308*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 3637 VISTA WAY

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## D. 专家名录

OCEANSIDE, CA 92056  
☎ Phone: (760) 758-2008  
Fax: (760) 458-2004  
🕒 After Hours Phone: (760) 758-2008  
Provider Gender: Female  
NPI: 1932605649  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

### OPHTHALMOLOGY

**SONG, DELU**  
Provider ID: 302871  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 3231 WARING CT STE S  
OCEANSIDE, CA 92056  
☎ Phone: (760) 631-6144  
Fax: (760) 724-3920  
🕒 After Hours Phone: (760) 631-6144  
Provider Gender: Male  
NPI: 1437689536  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s)

Spoken: Chinese, Mandarin  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP, UCSD Medical Group

### OPTOMETRIST

**GEE, JENNIFER**  
Provider ID: 290927  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4700 N RIVER RD  
OCEANSIDE, CA 92057  
☎ Phone: (760) 631-5000  
Fax: (760) 414-3892  
🕒 After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1336589332  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CALIFORNIA PACIFIC MEDICAL CENTER - D P APH  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### OPTOMETRIST

**GEE, JENNIFER**  
Provider ID: 290210  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 517 N HORNE ST  
OCEANSIDE, CA 92054  
☎ Phone: (951) 252-2720  
Fax: (760) 414-3892  
🕒 After Hours Phone: (951) 252-2720  
Provider Gender: Female  
NPI: 1336589332  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CALIFORNIA PACIFIC MEDICAL CENTER - D P APH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Community Care IPA LLC,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IHP of Southern Cal-PHP

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### **OPTOMETRIST**

---

**KIM, MICHAEL**

Provider ID: 290904

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 8AM-5PM  
M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **OPTOMETRIST**

---

**KIM, MICHAEL**

Provider ID: 290902

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 8AM-5PM  
M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **OPTOMETRIST**

---

**MORA, WENDY**

Provider ID: 290929

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **OPTOMETRIST**

---

**MORA, WENDY**

Provider ID: 290237

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **OPTOMETRIST**

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## D. 专家名录

### **RING, ROBERT**

Provider ID: 269380

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

3998 VISTA WAY STE 204  
OCEANSIDE, CA 92056

Phone: (760) 726-9383

Fax: (760) 726-9897

After Hours Phone: (760)  
726-9383

Provider Gender: Male

NPI: 1336228840

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 10AM-7PM  
TU-TH 9AM-5PM  
F 9AM-0PM

Website: N/A

IPA: Community Care IPA LLC

### **OPTOMETRIST**

### **TAM, EMILY**

Provider ID: 290317

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1497161236

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese, Mandarin,  
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

### **TAM, EMILY**

Provider ID: 290318

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1497161236

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese, Mandarin,  
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

### **TRAN, JESSICA**

Provider ID: 303731

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

### **TRAN, JESSICA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 303730  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **TRAN, JESSICA**

Provider ID: 303732

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **TRAN, JESSICA**

Provider ID: 304887

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **TRAN, JESSICA**

Provider ID: 304886

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

517 N HORNE ST  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OTOLARYNGOLOGY**

#### **BLISS, MORGAN**

Provider ID: 206086

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1020

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Fax: (760) 547-1021

☎ After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1760707657

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### **OTOLARYNGOLOGY**

#### **FRIESEN, TZYYNONG**

Provider ID: 244899

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

☎ After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1952740177

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### **OTOLARYNGOLOGY**

#### **LEUIN, SHELBY**

Provider ID: 206111

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

☎ After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1124230909

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL  
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### **OTOLARYNGOLOGY**

#### **PATEL, VIJAY**

Provider ID: 297036

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020

Fax: (760) 547-1021

☎ After Hours Phone: (760)  
547-1020

Provider Gender: Male

NPI: 1508250747

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, VALLEY CHILDRENS  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER
























🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>MEDICINE</b>	<b>MEDICINE</b>
<b>AGHILI, ROXANA</b> <i>Provider ID: 303781</i> <i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b>  3605 VISTA WAY STE 172 OCEANSIDE, CA 92056  <i>Phone: (760) 547-1000</i> <i>Fax: (760) 547-1021</i>  <i>After Hours Phone: (760) 547-1000</i> <i>Provider Gender: Female</i> <i>NPI: 1851927883</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Farsi</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i>	<b>BELLOMO, THOMAS</b> <i>Provider ID: 205603</i> <i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b>  3605 VISTA WAY STE 172 OCEANSIDE, CA 92056  <i>Phone: (760) 547-1020</i> <i>Fax: (760) 547-1021</i>  <i>After Hours Phone: (760) 547-1020</i> <i>Provider Gender: Male</i> <i>NPI: 1700926698</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i>	<b>BETTY, MARYANN RIVA</b> <i>Provider ID: 245755</i> <i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b>  3605 VISTA WAY STE 172 OCEANSIDE, CA 92056  <i>Phone: (760) 547-1000</i> <i>Fax: (760) 547-1021</i>  <i>After Hours Phone: (760) 547-1000</i> <i>Provider Gender: Female</i> <i>NPI: 1285014498</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i>
<b>PEDIATRIC EMERGENCY</b>	<b>PEDIATRIC EMERGENCY</b>	<b>PEDIATRIC EMERGENCY MEDICINE</b> <b>CHOO, SUN</b> <i>Provider ID: 296537</i> <i>Board Certified Specialty: No</i>

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## D. 专家名录

### **RADY CHILDRENS HEALTH NETWORK**

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1000  
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Female  
NPI: 1700047628

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No  
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC EMERGENCY MEDICINE**

#### **GORHAM, LAURA**

Provider ID: 275786

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1000  
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Female  
NPI: 1316162324

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC EMERGENCY MEDICINE**

#### **GROSS, MATTHEW**

Provider ID: 297175

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1000  
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Male  
NPI: 1942223664

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC EMERGENCY MEDICINE**

#### **JOSHI, WEENA**

Provider ID: 262236

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1020  
Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female  
NPI: 1376862177

Provider English Spoken: Y  
Cultural Competency: N

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## D. 专家名录

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **KINGDON, JOANNA**

Provider ID: 302319  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056  
 Phone: (760) 547-1000  
 Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1000  
 Provider Gender: Female  
 NPI: 1609495399  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **LOVEJOY, AMY**

Provider ID: 206109  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056  
 Phone: (760) 547-1020  
 Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1020  
 Provider Gender: Female  
 NPI: 1790856557  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE


#### **PARK, RONALD**



Provider ID: 295456  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056  
 Phone: (760) 547-1000  
 Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1000  
 Provider Gender: Male  
 NPI: 1881695914  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: No  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM


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## D. 专家名录

M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health Network








PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

 Website: N/A  
IPA: Rady Childrens Health Network








### PEDIATRIC EMERGENCY MEDICINE

**PARKER, SHERINE**  
Provider ID: 205787  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 Phone: (760) 547-1020  
Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1020  
Provider Gender: Female  
NPI: 1477626513  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT

### PEDIATRIC EMERGENCY MEDICINE























**QUINONES-PEREZ, BIANCA**  
Provider ID: 206951  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 Phone: (760) 547-1000  
Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1000  
Provider Gender: Female  
NPI: 1124360565  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

### PEDIATRIC EMERGENCY MEDICINE

**RUSSELL, SAMUEL**  
Provider ID: 301251  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 Phone: (760) 547-1000  
Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1000  
Provider Gender: Male  
NPI: 1215564265  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health Network

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## D. 专家名录

<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>	<b><u>MEDICINE</u></b>	<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>
<p><b>TODD, SARAH</b>  <i>Provider ID: 302801</i>  <i>Board Certified Specialty: No</i>  <b>RADY CHILDRENS HEALTH NETWORK</b>   3605 VISTA WAY STE 172  OCEANSIDE, CA 92056   <i>Phone: (760) 547-1000</i>  <i>Fax: (760) 547-1021</i>   <i>After Hours Phone: (760) 547-1000</i>  <i>Provider Gender: Female</i>  <i>NPI: 1407299787</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i>   <i>Website: N/A</i>  <i>IPA: Rady Childrens Health Network</i></p>	<p><b>VAIDYA, KAMALA</b>  <i>Provider ID: 205813</i>  <i>Board Certified Specialty: No</i>  <b>RADY CHILDRENS HEALTH NETWORK</b>   3605 VISTA WAY STE 172  OCEANSIDE, CA 92056   <i>Phone: (760) 547-1000</i>  <i>Fax: (760) 547-1021</i>   <i>After Hours Phone: (760) 547-1000</i>  <i>Provider Gender: Female</i>  <i>NPI: 1083840920</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i>   <i>Website: N/A</i>  <i>IPA: Rady Childrens Health Network</i></p>	<p><b>RADY CHILDRENS HEALTH NETWORK</b>   3605 VISTA WAY STE 172  OCEANSIDE, CA 92056   <i>Phone: (760) 547-1000</i>  <i>Fax: (760) 547-1021</i>   <i>After Hours Phone: (760) 547-1000</i>  <i>Provider Gender: Female</i>  <i>NPI: 1619359718</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i>   <i>Website: N/A</i>  <i>IPA: Rady Childrens Health Network</i></p>
<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p>
	<p><b>WANG, EMILY</b>  <i>Provider ID: 265953</i>  <i>Board Certified Specialty: No</i>  <b>RADY CHILDRENS HEALTH NETWORK</b>   3605 VISTA WAY STE 172</p>	

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## D. 专家名录

OCEANSIDE, CA 92056  
☎ Phone: (760) 547-1020  
Fax: (760) 547-1021  
📞 After Hours Phone: (760) 547-1020  
Provider Gender: Female  
NPI: 1427142363  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC GASTROENTEROLOGY

**CHU, CHRISTOPHER**  
Provider ID: 301642  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

☎ Phone: (760) 547-1020  
Fax: (760) 547-1021  
📞 After Hours Phone: (760) 547-1020  
Provider Gender: Male  
NPI: 1912369273  
☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Spanish, Yue  
Chinese  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS,  
PATRICIA**  
Provider ID: 294643  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
☎ Phone: (760) 547-1020  
Fax: (760) 547-1021  
📞 After Hours Phone: (760)

547-1020  
Provider Gender: Female  
NPI: 1144615659  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### PHYSICAL MEDICINE / REHABILITATION

**RICHARDSON, HENRY**  
Provider ID: 295852  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 3231 WARING CT STE K  
OCEANSIDE, CA 92056  
☎ Phone: (760) 607-5350  
Fax: (760) 607-5365  
📞 After Hours Phone: (760)  
607-5350  
Provider Gender: Male  
NPI: 1407052459  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PHYSICAL MEDICINE / REHABILITATION**


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#### **RYAN, KYLE**

Provider ID: 275661

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY  
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Male

NPI: 1447645742

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **PHYSICIANS ASSISTANT**


---

#### **KIVIAT, ANNETTE**

Provider ID: 302455

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **PHYSICIANS ASSISTANT**


---

#### **RAMOS, ELENA**

Provider ID: 301307

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 605 CROUCH ST BLDG C  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 566-1501

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1306489570

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **PHYSICIANS ASSISTANT**


---

#### **WRIGHT, DEREK**

Provider ID: 305530

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3231 WARING CT STE K  
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)  
607-5350

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Male

NPI: 1629674858


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### PSYCHOLOGIST

#### **COOK, SHERYL**

Provider ID: 304924

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 619 CROUCH ST STE 100  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Female


NPI: 1750420816


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 9AM-6:15PM

W 9AM-6PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST


#### **JENSEN, BRIAN**

Provider ID: 290775

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 619 CROUCH ST  
OCEANSIDE, CA 92054

 Phone: (760) 566-1620

Fax: (760) 433-4040

 After Hours Phone: (760)  
566-1620

Provider Gender: Male

NPI: 1518138049


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST


#### **KRAPES, MICHAEL**

Provider ID: 290097

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 566-1501

 After Hours Phone: (760)  
736-6767

Provider Gender: Male


NPI: 1215233028


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### REGISTERED PHYSICAL


#### THERAPIST

#### **FARRAR, COURTNEY**

Provider ID: 295874

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3231 WARING CT STE K  
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)  
607-5350

Provider Gender: Male


NPI: 1124577952


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **SURGERY COLON SURGERY**

#### **NASSERY, KRISTEN**

Provider ID: 300122

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3601 VISTA WAY STE 203  
OCEANSIDE, CA 92056

Phone: (760) 724-5352

Fax: (760) 724-5447

After Hours Phone: (760)  
724-5352

Provider Gender: Female

NPI: 1396059440

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-5PM  
F 8AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SURGERY ORTHOPEDIC**

#### **CIDAMBI, EMILY**

Provider ID: 246469

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (858) 966-6789

Fax: (858) 966-8519

After Hours Phone: (858)  
966-6789

Provider Gender: Female

NPI: 1659634699

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**

#### **PRUSS, ERIKA**

Provider ID: 303798

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1538402441

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**

#### **UPASANI, VIDYADHAR**

Provider ID: 260954

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)  
547-1020

Provider Gender: Male

NPI: 1548417652

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: Rady Childrens Health Network

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### SURGERY PEDIATRIC

#### **FAIRBANKS, TIMOTHY**

Provider ID: 205498

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes


### SURGERY PEDIATRIC

#### **KLING, KAREN**

Provider ID: 206129

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

### **PALMDALE**

### CERTIFIED NURSE


#### PRACTITIONER

#### **JONES, TYESHIA**

Provider ID: 306078

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 38920 TRADE CENTER DR  
PALMDALE, CA 93551

 Phone: (833) 438-8763

Fax: (833) 438-8700

 After Hours Phone: (833)  
438-8763

Provider Gender: Female

NPI: 1104276419

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: PALMDALE REGIONAL MEDICAL CENTER, ST BERNARDINE MED CTR, CALIFORNIA HOSP MED CTR LOS ANGELES

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

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## D. 专家名录

N




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

### PERRIS

#### CERTIFIED NURSE PRACTITIONER






**BLAND, JACELIS**  
*Provider ID: 296767*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 1675 N PERRIS BLVD STE G1  
PERRIS, CA 92571  
 *Phone: (760) 736-7676*  
*Fax: (760) 566-1501*  
 *After Hours Phone: (760) 736-7676*  
*Provider Gender: Female*  
*NPI: 1801522859*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

N




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-4:30PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### POWAY





#### ANESTHESIOLOGY PAIN MANAGEMENT

**BROWNLOW, ROY**  
*Provider ID: 308113*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 15725 POMERADO RD STE 201  
POWAY, CA 92064  
 *Phone: (760) 610-0522*  
*Fax: (760) 610-0523*  
 *After Hours Phone: (760) 610-0522*  
*Provider Gender: Male*  
*NPI: 1205949914*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*




N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*


#### CERTIFIED NURSE PRACTITIONER

**JOHNSON, CHRISTINE**  
*Provider ID: 295458*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 13010 POWAY RD  
POWAY, CA 92064  
 *Phone: (858) 218-3000*  
*Fax: (360) 462-2742*  
 *After Hours Phone: (858) 218-3000*  
*Provider Gender: Female*  
*NPI: 1295049229*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: PARADISE VALLEY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 13\None*  
*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

#### CERTIFIED NURSE PRACTITIONER

**WOLFE, AMANDA**  
*Provider ID: 243582*  
*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*  
 15525 POMERADO RD STE

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## D. 专家名录

B1  
POWAY, CA 92064  
☎ Phone: (858) 457-8333  
🕒 After Hours Phone: (858) 457-8333  
Provider Gender: Female  
NPI: 1063813475  
🗨 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### **CERTIFIED NURSE PRACTITIONER**

**WRIGHT, KIMBERLY**  
Provider ID: 256378  
Board Certified Specialty: No COMMUNITY CARE IPA LLC  
📍 15611 POMERADO RD STE 400  
POWAY, CA 92064  
☎ Phone: (858) 675-3200  
Fax: (858) 673-1587  
🕒 After Hours Phone: (858) 675-3200  
Provider Gender: Female

NPI: 1811400708  
🗨 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **DERMATOLOGY**

**LIN, SHINKO**  
Provider ID: 306320  
Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
📍 15725 POMERADO RD STE 102  
POWAY, CA 92064  
☎ Phone: (619) 267-8303  
Fax: (619) 267-4835  
🕒 After Hours Phone: (619) 267-8303  
Provider Gender: Female  
NPI: 1205130036  
🗨 Provider English Spoken: Y  
🗨 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8:30AM-4:30PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### **DERMATOLOGY**

**LIN, SHINKO**  
Provider ID: 308217  
Board Certified Specialty: No COMMUNITY CARE IPA LLC  
📍 15725 POMERADO RD STE 102  
POWAY, CA 92064  
☎ Phone: (619) 267-8303  
Fax: (619) 267-4835  
🕒 After Hours Phone: (619) 267-8303  
Provider Gender: Female  
NPI: 1205130036  
🗨 Provider English Spoken: Y  
🗨 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8:30AM-4:30PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IHP of Southern Cal-PHP

---

### **FAMILY PRACTICE**

---

#### **FLINN, SCOTT**

Provider ID: 270054

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2938

After Hours Phone: (858) 675-3100

Provider Gender: Male

NPI: 1184694598

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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### **FAMILY PRACTICE**

---

#### **NAJAND, SADAF**

Provider ID: 270055

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858) 675-3200

Provider Gender: Female

NPI: 1669769717

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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### **FAMILY PRACTICE**

---

#### **WHITE, KERI**

Provider ID: 269491

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858) 675-3200

Provider Gender: Female

NPI: 1295701159

Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### **INTERNAL MEDICINE**

---

#### **CHEN, ANDREW**

Provider ID: 269315

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2937

After Hours Phone: (858) 675-3100

Provider Gender: Male

NPI: 1134357007

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

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## D. 专家名录

IPA: Community Care IPA LLC

### INTERNAL MEDICINE

#### **THAPER, MOHINDERPAL**

Provider ID: 270016

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE  
575  
POWAY, CA 92064

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)  
489-1458

Provider Gender: Male

NPI: 1295795037

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL

#### CARDIOLOGY

#### **BAYAT, HAMED**

Provider ID: 269450

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE  
400  
POWAY, CA 92064

Phone: (858) 675-3110

Fax: (858) 675-3110

After Hours Phone: (858)  
675-3110

Provider Gender: Male

NPI: 1356344196

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,  
Community Care IPA LLC

### NEONATAL / PERINATAL MEDICINE

#### **SAUER, CHARLES**

Provider ID: 206164

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

15615 POMERADO RD  
POWAY, CA 92064

Phone: (858) 613-4143  
Fax: (858) 613-4539

After Hours Phone: (858)  
613-4143

Provider Gender: Male

NPI: 1538388988

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
PALOMAR MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PALOMAR  
HEALTH, SCRIPPS MEMORIAL  
HOSPITAL, SOUTHWEST  
HEALTHCARE RANCHO  
SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

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## D. 专家名录

### NEONATAL / PERINATAL MEDICINE

#### **WEST, JULIE**

Provider ID: 297072

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

15615 POMERADO RD  
POWAY, CA 92064

Phone: (858) 613-4143  
Fax: (858) 613-4539

After Hours Phone: (858)  
613-4143

Provider Gender: Female

NPI: 1811151848

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OBSTETRICS / GYNECOLOGY

#### **COBB, DAMON**

Provider ID: 206030

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

### NETWORK

15706 POMERADO RD STE  
110

POWAY, CA 92064

Phone: (858) 485-0130

Fax: (858) 485-9424

After Hours Phone: (858)  
485-0130

Provider Gender: Male

NPI: 1851435598

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, SCRIPPS MEMORIAL  
HOSPITAL, GROSSMONT

HOSPITAL, SHARP MEMORIAL  
HOSPITAL, PALOMAR

MEDICAL CENTER, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 9AM-4:30PM  
F 9AM-1PM

Website: N/A

IPA: Rady Childrens Health  
Network

### OPHTHALMOLOGY

#### **LOZIER, JEFFREY**

Provider ID: 270187

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

15611 POMERADO RD STE  
400

POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 618-1523

After Hours Phone: (858)  
675-3100

Provider Gender: Male

NPI: 1225004450

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### OPTOMETRIST

#### **KIM, MICHELLE**

Provider ID: 270014

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE  
400

POWAY, CA 92064

Phone: (858) 675-3140

Fax: (858) 613-2936

After Hours Phone: (858)  
675-3140

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## D. 专家名录

Provider Gender: Female

NPI: 1457328825

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### PHYSICIANS ASSISTANT

**CHATFIELD, ALEXANDRA**

Provider ID: 276715

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE  
525  
POWAY, CA 92064

Phone: (858) 485-0050

Fax: (858) 673-5187

After Hours Phone: (858)  
485-0050

Provider Gender: Female

NPI: 1215584628

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### PODIATRIST

**BRAZIER, SETH**

Provider ID: 306398

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

15706 POMERADO RD STE  
102  
POWAY, CA 92064

Phone: (858) 485-1494

Fax: (858) 485-1515

After Hours Phone: (858)  
485-1494

Provider Gender: Male

NPI: 1033554324

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAWEAH  
DELTA DISTRICT HOSP, SELMA  
COMMUNITY HOSPITAL,  
ADVENTIST MEDICAL

CENTER, ADVENTIST MED CTR  
REEDLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PODIATRIST

**HAN, KYOUNG**

Provider ID: 296326

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

15706 POMERADO RD STE  
102  
POWAY, CA 92064

Phone: (858) 485-1494

Fax: (858) 485-1515

After Hours Phone: (858)  
485-1494

Provider Gender: Female

NPI: 1083954671

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
SADDLEBACK MEMORIAL  
MED CTR, PALOMAR HEALTH,  
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PODIATRIST

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## D. 专家名录

### READ, TRENTON

Provider ID: 296656

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

15706 POMERADO RD STE  
102  
POWAY, CA 92064

Phone: (858) 485-1494  
Fax: (858) 485-1515

After Hours Phone: (858)  
485-1494

Provider Gender: Male  
NPI: 1952963431

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### PSYCHOLOGIST

### VALLEZ-BARLAM, ANDREA

Provider ID: 290629

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

13010 POWAY RD  
POWAY, CA 92064

Phone: (858) 218-3000  
Fax: (858) 633-4688

After Hours Phone: (858)  
218-3000

Provider Gender: Female  
NPI: 1710902143

Provider English Spoken: Y  
Provider Language(s)  
Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### RHEUMATOLOGY

### RAO, SOUMYA

Provider ID: 46060

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE  
400  
POWAY, CA 92064

Phone: (858) 675-3150  
Fax: (858) 924-1775

After Hours Phone: (858)  
675-3150

Provider Gender: Female  
NPI: 1033388616

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Hindi, Kannada,  
Russian, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### RHEUMATOLOGY

### REDDY, SMITHA

Provider ID: 269402

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15725 POMERADO RD STE  
117  
POWAY, CA 92064

Phone: (858) 312-1717  
Fax: (858) 435-0207

After Hours Phone: (858)  
312-1717

Provider Gender: Female  
NPI: 1750534715

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Hindi, Kannada,  
Telugu

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, PALOMAR  
HEALTH, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,


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## D. 专家名录

SCRIPPS GREEN HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-4PM

 Website: N/A

IPA: Community Care IPA LLC


### SURGERY GENERAL

#### **GROVE, JAY**


Provider ID: 305851

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 15611 POMERADO RD  
POWAY, CA 92064

 Phone: (858) 675-3100

Fax: (858) 673-5187

 After Hours Phone: (858)  
675-3100

Provider Gender: Male

NPI: 1912971334

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS


MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC

### SURGERY ORTHOPEDIC


#### **BALIKIAN, PHILIP**

Provider ID: 119552


Board Certified Specialty: Yes  
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE  
400

POWAY, CA 92064


 Phone: (858) 613-8900


Fax: (858) 618-1523

 After Hours Phone: (858)  
613-8900

Provider Gender: Male

NPI: 1407803687

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Armenian, Italian,  
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR


HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC

### SURGERY ORTHOPEDIC

#### **BALIKIAN, PHILIP**

Provider ID: 257485


Board Certified Specialty: Yes

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

 15611 POMERADO RD STE  
400

POWAY, CA 92064

 Phone: (858) 613-8900


Fax: (858) 618-1523

 After Hours Phone: (858)  
613-8900

Provider Gender: Male

NPI: 1407803687

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Armenian, Italian,  
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

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## D. 专家名录

HEALTH PLAN DIRECT,  
Community Care IPA LLC

### **SURGERY ORTHOPEDIC**

#### **BRIED, JAMES**

Provider ID: 269500

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

215 15611 POMERADO RD STE  
525

POWAY, CA 92064

Phone: (858) 485-0050

Fax: (858) 485-5071

After Hours Phone: (858)  
485-0050

Provider Gender: Male

NPI: 1891809257

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **RAMONA**

### **CERTIFIED NURSE PRACTITIONER**

#### **SALAS, JESSICA**

Provider ID: 269344

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

215 211 13TH ST

RAMONA, CA 92065

Phone: (760) 789-5160

Fax: (760) 788-7962

After Hours Phone: (760)  
789-5160

Provider Gender: Female

NPI: 1356817431

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC

### **CHIROPRACTOR**

#### **JIMENEZ, CLARIBEL**

Provider ID: 307942

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

220 220 ROTANZI ST

RAMONA, CA 92065

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1801255484

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **WELLS, TODD**

Provider ID: 299118

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

215 211 13TH ST

RAMONA, CA 92065

Phone: (760) 789-5160

Fax: (760) 722-5292

After Hours Phone: (760)  
789-5160

Provider Gender: Male

NPI: 1952377806

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

**PROVIDER**  
 Website: N/A  
IPA: Community Care IPA LLC



### RIVERSIDE

#### PHYSICIANS ASSISTANT

##### DUARTE, ZULMA


Provider ID: 295431  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 8856 ARLINGTON AVE  
RIVERSIDE, CA 92503  
 Phone: (951) 710-3970  
Fax: (360) 462-5824  
 After Hours Phone: (951)  
710-3970

Provider Gender: Female  
NPI: 1245885912

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

#### PHYSICIANS ASSISTANT

##### NJIE, EMADE

Provider ID: 298710  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 8856 ARLINGTON AVE  
RIVERSIDE, CA 92503

 Phone: (951) 710-3970  
Fax: (360) 462-5824

 After Hours Phone: (951)  
710-3970

Provider Gender: Female  
NPI: 1881233229


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### SAN DIEGO

#### ADOLESCENT MEDICINE

##### CHELVAKUMAR, GAYATHRI

Provider ID: 296674  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 8110 BIRMINGHAM WAY FL  
2




SAN DIEGO, CA 92123  
 Phone: (858) 966-8493  
Fax: (858) 966-8818

 After Hours Phone: (858)  
966-8493

Provider Gender: Female

NPI: 1447473848



 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

#### ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

##### HONG, KIMBERLY

Provider ID: 246311  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (858) 657-8530  
 After Hours Phone: (858)  
657-8530

Provider Gender: Female  
NPI: 1346515442

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### ALLERGY IMMUNOLOGY

#### **JAMES, CHRISTINE**

Provider ID: 284917

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144589979

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### ALLERGY IMMUNOLOGY


#### **RIEDL, MARC**


Provider ID: 255768

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER LN STE 230

SAN DIEGO, CA 92122

 Phone: (858) 657-5350

 After Hours Phone: (858) 657-5350

Provider Gender: Male

NPI: 1285654889

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### ANESTHESIOLOGY


#### **ALEXANDER, BRENTON**


Provider ID: 242303

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1811366644

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### ANESTHESIOLOGY


#### **BECERRA SONGOLO, TOSHA**

Provider ID: 300068

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265938724

 Provider English Spoken: Y  
Cultural Competency: N

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **BRUNO, KELLY**


Provider ID: 238903

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891130993

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**


#### **CANO, SARAH**


Provider ID: 200959

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750517306

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS GREEN  
HOSPITAL, SCRIPPS GREEN  
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**


#### **CURRAN, BRIAN**


Provider ID: 239002

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1710373642

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**


#### **FEJLEH, ASHLEY**

Provider ID: 269502

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1609353465

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **FUNDINGSLAND, BRENT**

Provider ID: 280468

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1831166560

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, SADDLEBACK

MEMORIAL MED CTR, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **HYLTON, DIANA**

Provider ID: 241735

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932527751

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **MEYER, MEGAN**

Provider ID: 239607

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1720473044

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **MILLAR, MELISSA**

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## D. 专家名录

Provider ID: 201308

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (619) 543-5754

After Hours Phone: (619)  
543-5754

Provider Gender: Female

NPI: 1417361981

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

**NGUYEN, QUOC SY**

Provider ID: 242188

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871911644

Provider English Spoken: Y  
Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

**OSWALD, JESSICA**

Provider ID: 239600

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1427315118

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

**SHAW, SUSANNA**

Provider ID: 255316

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1063685477

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **ANESTHESIOLOGY**


#### **SORIA, CLAIRE**

Provider ID: 243294

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1447516414

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **ANESTHESIOLOGY**


#### **SREJIC, UNA**

Provider ID: 206383

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1588723860

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford  
Health Care, UCSF Medical

Center At Mission Bay, UCSF  
MEDICAL CENTER AT MOUNT  
ZION, MEDICAL CTR AT UCSF,  
UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **ANESTHESIOLOGY**


#### **SUYDAM, STEVEN**

Provider ID: 286569

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1386856821

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,  
SHARP MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,  
TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED  
CTR, SHARP CHULA VISTA

MED CTR, SHARP CORONADO  
HOSP AND HEALTHCARE CTR,

RADY CHILDRENS HOSPITAL  
SAN DIEGO, SCRIPPS GREEN


HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录


<b>ANESTHESIOLOGY</b>	
<b>TRIVEDI, SURAJ</b> Provider ID: 246749 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1699057885 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	<b>ANESTHESIOLOGY</b> Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1003261595 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<b>ANESTHESIOLOGY</b>	<b>ANESTHESIOLOGY</b>
<b>TSUDA, PAIGE</b> Provider ID: 271682 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273	<b>TULLY, JEFFREY</b> Provider ID: 283689 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1871912493 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UC DAVIS
<b>ANESTHESIOLOGY</b>	<b>ANESTHESIOLOGY</b>
	<b>TZENG, ERIC</b> Provider ID: 284577 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1801258264 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):

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## D. 专家名录

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### ANESTHESIOLOGY

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#### **YODER, ANDREA**

Provider ID: 272804

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### ANESTHESIOLOGY


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#### **YOUNAN, LAWRENCE**

Provider ID: 240870

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1922432475

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### ANESTHESIOLOGY CRITICAL

---

#### CARE MEDICINE


---

#### **KRAUSE, MARTIN**

Provider ID: 280539

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1417243239

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### ANESTHESIOLOGY PAIN

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#### MANAGEMENT

---


#### **CASTELLANOS, JOEL**

Provider ID: 243553

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1700296514

 Provider English Spoken: Y  
Cultural Competency: N

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## D. 专家名录

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### ANESTHESIOLOGY PAIN MANAGEMENT

#### **DAIRO, BRANDON**


Provider ID: 300089

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)  
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


### ANESTHESIOLOGY PAIN MANAGEMENT

#### **DAIRO, BRANDON**


Provider ID: 299880

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)  
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### CARDIAC

### ELECTROPHYSIOLOGY

#### **HAN, FREDERICK**

Provider ID: 210099

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1427255967

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### CARDIAC

### ELECTROPHYSIOLOGY

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## D. 专家名录

### HAN, FREDERICK

Provider ID: 210012

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1427255967

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CARDIOVASCULAR DISEASE

#### ALANI, ANAS

Provider ID: 201252

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

4168 FRONT ST  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1154633709

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR, ARROWHEAD REGIONAL  
MEDICAL CENTER, LOMA  
LINDA UNIVERSITY MED CTR,  
RIVERSIDE COUNTY

REGIONAL MED CTR, LAC  
RANCHO LOS AMIGOS  
NATIONAL REHAB CENTER,  
LOS ANGELES COUNTY  
HARBOR UCLA MEDICAL  
CENTER, LOS ANGELES  
COUNTY HARBOR UCLA  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CARDIOVASCULAR DISEASE

#### CASTELLANOS, LUIS

Provider ID: 211764

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST FL 3  
SAN DIEGO, CA 92103

Phone: (858) 657-8530  
Fax: (619) 543-2287

After Hours Phone: (858)  
657-8530

Provider Gender: Male  
NPI: 1013059286

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, PIONEERS MEMORIAL  
HOSPITAL, EL CENTRO  
REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CARDIOVASCULAR DISEASE

#### CASTELLANOS, LUIS

Provider ID: 211765

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273  
Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1013059286

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, PIONEERS MEMORIAL  
HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

#### **LERNER, JONATHAN**

Provider ID: 303447

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 292 EUCLID AVE STE 210  
SAN DIEGO, CA 92114

☎ Phone: (619) 616-2100

Fax: (619) 616-2104

☎ After Hours Phone: (619)  
616-2100

Provider Gender: Male

NPI: 1962899823

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **CARDIOVASCULAR DISEASE**

#### **MIZZELL, ANNA**

Provider ID: 214020

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 16950 VIA TAZON  
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1851561021

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

#### **PHREANER, NICHOLAS**

Provider ID: 239946

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 16950 VIA TAZON  
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1023373040

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

#### **PROHASKA, THOMAS**

Provider ID: 299912

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1861889644  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **CARDIOVASCULAR DISEASE**

**YEANG, CALVIN**  
Provider ID: 238822  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (858) 657-8530  
📞 After Hours Phone: (858) 657-8530  
Provider Gender: Male  
NPI: 1598011058  
☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Mandarin  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**  
Provider ID: 304137  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4910 DIRECTORS PL  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104129485

☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

Provider ID: 277967  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9333 GENESEE AVE STE 200  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104129485  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**  
Provider ID: 277968  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9909 MIRA MESA BLVD STE 200  
SAN DIEGO, CA 92131  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 1104129485


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**


**ARELLANO, JACQUELINE**

Provider ID: 304138

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**


**ARELLANO, JACQUELINE**

Provider ID: 277966

Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104129485


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**


**CRAFT, KEVIN**

Provider ID: 290942

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**

Provider ID: 277699

Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

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## D. 专家名录

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### THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED ACUPUNCTURIST**

#### JULIAN, FIDES

Provider ID: 304132

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED ACUPUNCTURIST**


#### JULIAN, FIDES

Provider ID: 277701

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED ACUPUNCTURIST**


### JULIAN, FIDES

Provider ID: 277700

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED ACUPUNCTURIST**

#### JULIAN, FIDES

Provider ID: 304131

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4910 DIRECTORS PL

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## D. 专家名录

SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1407401128

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A  
IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

#### **LAM, KHANH**

Provider ID: 295380  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110  
☎ Phone: (619) 325-1161  
Fax: (619) 325-1717  
🕒 After Hours Phone: (619) 325-1161  
Provider Gender: Male  
NPI: 1649594979

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Chinese, French,  
Vietnamese

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

#### **SEITZ, GRETCHEN**

Provider ID: 246474  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 9995 CARMEL MOUNTAIN  
RD STE B10-B11  
SAN DIEGO, CA 92129  
☎ Phone: (844) 200-2426  
Fax: (858) 240-6470  
🕒 After Hours Phone: (844) 200-2426

Provider Gender: Female  
NPI: 1396876959

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **CERTIFIED NURSE PRACTITIONER**

#### **AGUILA, YESENIA**

Provider ID: 304624  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 292 EUCLID AVE STE 115  
SAN DIEGO, CA 92114

☎ Phone: (619) 266-3332  
Fax: (619) 266-6000

🕒 After Hours Phone: (619) 266-3332

Provider Gender: Female  
NPI: 1245966092

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE**

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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### **PRACTITIONER**

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#### **ALBARRAN-SLOVIN, MELODY**

Provider ID: 299328

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1016 OUTER RD  
SAN DIEGO, CA 92154

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1740953249

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE**

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#### **PRACTITIONER**

---

#### **ALSTEEN, STEPHANIE**

Provider ID: 291389

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1013680982

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE**

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#### **PRACTITIONER**

---

#### **AMOS, MARIA**

Provider ID: 291439

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1235891953

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE**

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#### **PRACTITIONER**

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#### **ARVIZU, MARGARITA**

Provider ID: 307976

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 474-4008

After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1558058636

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: Community Care IPA LLC

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### **CERTIFIED NURSE**

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#### **PRACTITIONER**

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#### **BAKER, TANYA**

Provider ID: 255625

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4510 EXECUTIVE DR

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## D. 专家名录

SAN DIEGO, CA 92121  
☎ Phone: (858) 534-8019  
📞 After Hours Phone: (858) 534-8019  
Provider Gender: Female  
NPI: 1699184259  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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**BENARD, ROBERT**  
Provider ID: 268229  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1184027724  
☑ Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UNIVERSITY HSP  
OF SAN DIEGO CO, Highland  
Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---

**BILOTTA, NATALIE**  
Provider ID: 291418  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1144809393  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RIVERSIDE  
COMMUNITY HOSP  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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**BROWN, VICTORIA**  
Provider ID: 307669  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1750033890  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---


**BROWN, VICTORIA**  
Provider ID: 307668  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 Phone: (800) 922-6827  
 After Hours Phone: (800)  
922-6827

Provider Gender: Female  
NPI: 1750033890

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE** **PRACTITIONER**


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#### **BUENROSTRO, CHRISTINA**




Provider ID: 243718  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1851749253

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **BUI, ANH**

Provider ID: 304273  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Male  
NPI: 1184309684

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 14\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


---

### **CERTIFIED NURSE** **PRACTITIONER**

---



#### **BUI, ANH**

Provider ID: 304272  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Male  
NPI: 1184309684

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 14\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **CAMARGO-LOWTHERS, ANGELICA**

Provider ID: 295914  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 8010 FROST ST STE 220

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 637-4700  
Fax: (858) 637-4701  
🕒 After Hours Phone: (858) 637-4700  
Provider Gender: Female  
NPI: 1912982539  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD

### CERTIFIED NURSE PRACTITIONER

**CAMARGO-LOWTHERS, ANGELICA**  
Provider ID: 307993  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 8010 FROST ST STE 100  
SAN DIEGO, CA 92123  
☎ Phone: (858) 640-5000  
Fax: (858) 636-2903  
🕒 After Hours Phone: (858) 640-5000  
Provider Gender: Female

NPI: 1912982539  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD

### CERTIFIED NURSE PRACTITIONER

**CAMARGO-LOWTHERS, ANGELICA**  
Provider ID: 54944  
Board Certified Specialty: No  
BALBOA NEPHROLOGY MED GRP INC  
📍 8010 FROST ST STE 510  
SAN DIEGO, CA 92123  
☎ Phone: (858) 637-4700  
Fax: (858) 637-4701  
🕒 After Hours Phone: (858) 637-4700  
Provider Gender: Female  
NPI: 1912982539  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N






























Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 9AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD

### CERTIFIED NURSE PRACTITIONER

**CAPOZZI, JENNIFER**  
Provider ID: 241031  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1336258276  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b><u>CERTIFIED NURSE</u></b></p> <p><b><u>PRACTITIONER</u></b></p> <hr/> <p><b>CHANTALA, ELIZABETH</b></p> <p>Provider ID: 291305</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1942430442</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b><u>CERTIFIED NURSE</u></b></p> <p><b><u>PRACTITIONER</u></b></p> <hr/> <p><b>CHAVEZ, ALEXANDRIA</b></p> <p>Provider ID: 243357</p> <p>Board Certified Specialty: No</p>	<p>UCSD MEDICAL GROUP</p> <p> 4510 EXECUTIVE DR STE 7 SAN DIEGO, CA 92121</p> <p> Phone: (800) 926-8273</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1811543622</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b><u>CERTIFIED NURSE</u></b></p> <p><b><u>PRACTITIONER</u></b></p> <hr/> <p><b>CHEATHAM, BRITTANY</b></p> <p>Provider ID: 291461</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1184111684</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p>	<p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b><u>CERTIFIED NURSE</u></b></p> <p><b><u>PRACTITIONER</u></b></p> <hr/> <p><b>CHOATE, BERNADETTE</b></p> <p>Provider ID: 286369</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1104173558</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>
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## D. 专家名录

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### **CERTIFIED NURSE PRACTITIONER**

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#### **CHOATE, BERNADETTE**

Provider ID: 286368

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104173558

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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#### **COLEMAN, PAGE**

Provider ID: 304288

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)  
280-2058

Provider Gender: Female

NPI: 1871365312

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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#### **CONNER, PAMELA**

Provider ID: 299930

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770558967

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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#### **CONNOR, CAROLINE**

Provider ID: 279835

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1609081710

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **CONNOR, CAROLINE**

*Provider ID: 279836*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 6030 VILLAGE WAY  
SAN DIEGO, CA 92130  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1609081710*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


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### **CERTIFIED NURSE** **PRACTITIONER**




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#### **COSINO, ANJELICA**

*Provider ID: 201309*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1295238749*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **CERTIFIED NURSE** **PRACTITIONER**




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#### **DAVIES, SUMMER**

*Provider ID: 253692*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8899 UNIVERSITY CENTER

LN STE 220

SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1679850671*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **DAVIS, JANET**

*Provider ID: 255796*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 *Phone: (619) 471-9250*  
*Fax: (619) 471-9275*  
 *After Hours Phone: (619) 471-9250*  
*Provider Gender: Female*

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## D. 专家名录


NPI: 1164616280


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**


---

**DE DIOS, SARAH**

Provider ID: 300051

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1528632742

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


---

**DEL VECCHIO, MEGAN**

Provider ID: 301726

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1437662863

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**


---

**DEL VECCHIO, MEGAN**

Provider ID: 301725

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1437662863

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


**DEUTSCH, KAREN**

Provider ID: 247981

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1740517127

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---


**DEUTSCH, KAREN**

Provider ID: 247980

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST FL 3  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1740517127

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

**DOAN, ANGELA**

Provider ID: 291425

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1639638968

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

**DOAN, ANGELA**

Provider ID: 291426

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8372


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8372

Provider Gender: Female

NPI: 1639638968

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER


---

**DRISCOLL, SUSAN**

Provider ID: 298968

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173



 Phone: (619) 662-4100

Fax: (619) 758-3384

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

**PROVIDER**  
🕒 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**DRISCOLL, KARRIE**  
Provider ID: 286345  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1396085098  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

🗿 Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**DWYER, ERIN**

Provider ID: 269863  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 4060 4TH AVE STE 310  
SAN DIEGO, CA 92103  
📞 Phone: (619) 297-4707  
Fax: (858) 429-7927

🕒 After Hours Phone: (619)  
297-4707  
Provider Gender: Female  
NPI: 1003260894  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

🗿 Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**ECLARINO, GALELEO**  
Provider ID: 296764  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 9995 CARMEL MOUNTAIN  
RD STE B1011  
SAN DIEGO, CA 92129  
📞 Phone: (844) 200-2426  
Fax: (858) 240-6470

🕒 After Hours Phone: (844)  
200-2426  
Provider Gender: Female  
NPI: 1518687748  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
🗿 Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**ERICKSON, LISA**  
Provider ID: 278982  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1669442182  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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**ERICKSON, LISA**


Provider ID: 287444

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1669442182

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER


---

**FELD, KEREN**

Provider ID: 297672

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)  
563-0250

Provider Gender: Female

NPI: 1730835083

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER

---


**FISHER, SLOANE**


Provider ID: 301585

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1538807003


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, CHILDRENS HOSP OF  
LOS ANGELES

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

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### CERTIFIED NURSE PRACTITIONER

---

**GARTH, MELISSA**

Provider ID: 274053

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1689232977

 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**


**GIORGI, ASHLEY**

Provider ID: 304877

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE

SAN DIEGO, CA 92105


 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)  
563-0250

Provider Gender: Female

NPI: 1952174203

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**


**GOMEZ, LESLIE**

Provider ID: 299466


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**

Provider ID: 299468

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

**GOMEZ, LESLIE**

Provider ID: 299467

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


---

**HA, THU**

Provider ID: 293260

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


---

**HA, THU**

Provider ID: 293261

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

---


**HARKNESS, RUMIKO**


Provider ID: 208841

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487785093

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


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**HAROUSH, GAL**

Provider ID: 302475

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1992461230

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 268656

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **HART, BECKY**

Provider ID: 305337

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)  
233-8500

Provider Gender: Female

NPI: 1316626344

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **HEAD, KRISTIN**

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

Fax: (858) 966-4064

 After Hours Phone: (858)  
966-7484

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **HILL, GENIELYN**


Provider ID: 299144

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426


Fax: (619) 434-1613

 After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1710632435

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **HILLIARD, THESALONICA**

Provider ID: 284022

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)  
200-2426


Provider Gender: Female




NPI: 1861956724

 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录





 *Provider Language(s) Spoken: Tagalog*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---







**HOOPER, BONNIE**  
*Provider ID: 275254*  
*Board Certified Specialty: No COMMUNITY CARE IPA LLC*  
 9339 GENESEE AVE STE 350  
 SAN DIEGO, CA 92121  
 *Phone: (858) 454-4300*  
*Fax: (858) 454-5088*  
 *After Hours Phone: (858) 454-4300*  
*Provider Gender: Female*  
*NPI: 1821062878*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---

**HOOPER, BONNIE**  
*Provider ID: 307208*  
*Board Certified Specialty: No COMMUNITY CARE IPA LLC*  
 9095 RIO SAN DIEGO DR STE 300  
 SAN DIEGO, CA 92108  
 *Phone: (619) 298-9809*  
*Fax: (619) 298-9823*  
 *After Hours Phone: (619) 298-9809*  
*Provider Gender: Female*  
*NPI: 1821062878*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
**N**  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*


---

**CERTIFIED NURSE**  
**PRACTITIONER**



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**IBARRA, MARTHA**  
*Provider ID: 295392*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 *Phone: (858) 279-0925*  
*Fax: (858) 633-4680*

 *After Hours Phone: (858) 279-0925*

*Provider Gender: Female*  
*NPI: 1114957289*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 14\None*  
*American Sign Language (ASL):*  
**N**

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 8:30AM-5:30PM TU 8:30AM-8:30PM W 8:30AM-5:30PM TH 8:30AM-8:30PM F 8:30AM-5:30PM SA 9AM-4PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---

**IBARRA, MARTHA**  
*Provider ID: 295393*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-5:30PM  
TU 8:30AM-8:30PM  
W 8:30AM-5:30PM  
TH 8:30AM-8:30PM  
F 8:30AM-5:30PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**INSTONE, SUSAN**

Provider ID: 293254

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)  
280-2058

Provider Gender: Female

NPI: 1710223268

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**INSTONE, SUSAN**

Provider ID: 293255

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1710223268

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**JONES, CHRISTA**

Provider ID: 275563

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1396371431

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**


---

**KEMP, KATHRINE**

Provider ID: 301276

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101


 Phone: (619) 645-6405

Fax: (619) 687-1067

 After Hours Phone: (619)  
645-6405

Provider Gender: Female

NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**


---

**KI, TRISH**


Provider ID: 293293

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**


---

**KI, TRISH**

Provider ID: 293294

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**


---

**KIDANE, ZINNIA**

Provider ID: 302426

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1780334110

 Provider English Spoken: Y

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **CERTIFIED NURSE PRACTITIONER**

**KIDANE, ZINNIA**

Provider ID: 302427

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1780334110

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE**


### **PRACTITIONER**

**KLEMENCIC, TAHNEE**

Provider ID: 302628

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 195  
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)  
966-8974

Provider Gender: Female

NPI: 1134802283

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### **CERTIFIED NURSE PRACTITIONER**


**LAFORTEZA, JOZELLE**


Provider ID: 202666

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1538578307

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**

Provider ID: 301603

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4060 4TH AVE STE 310  
SAN DIEGO, CA 92103

 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)  
297-4707

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


NPI: 1457670119

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


**CERTIFIED NURSE**  
**PRACTITIONER**


---

**LANE, KIMBERLY**

Provider ID: 301597

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 11770 BERNARDO PLAZA  
CT STE 270  
SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)  
485-0554

Provider Gender: Female


NPI: 1457670119

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


**CERTIFIED NURSE**  
**PRACTITIONER**


---

**LANE, KIMBERLY**


Provider ID: 301600

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3444 KEARNY VILLA RD  
STE 201  
SAN DIEGO, CA 92123

 Phone: (858) 430-1101

Fax: (858) 221-5049

 After Hours Phone: (858)  
430-1101

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---

**LANE, KIMBERLY**


Provider ID: 301601

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3444 KEARNY VILLA RD

STE 202

SAN DIEGO, CA 92123

 Phone: (858) 429-7646

Fax: (858) 429-7929

 After Hours Phone: (858)  
429-7646

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

**CERTIFIED NURSE**  
**PRACTITIONER**


---

**MANRIQUEZ, LISETTE**

Provider ID: 307103

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 286 EUCLID AVE STE 302  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 428-7952

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1760058911

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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#### **MANZO, CORINA**

Provider ID: 304481

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE  
SAN DIEGO, CA 92103


 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)  
234-2158

Provider Gender: Female

NPI: 1669087326

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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#### **MAROSOK, MICHELLE**

Provider ID: 305311

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 16918 DOVE CANYON RD  
STE 103

SAN DIEGO, CA 92127

 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)  
649-5100

Provider Gender: Female

NPI: 1669166112

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE PRACTITIONER**


---

#### **MARTINEZ, CAROLYN**

Provider ID: 293345

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD  
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **MEDINA, RUBELETA**

Provider ID: 296673

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 9995 CARMEL MOUNTAIN  
RD STE B1011

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 240-6470

 After Hours Phone: (844)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

200-2426

Provider Gender: Female

NPI: 1881153963

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### CERTIFIED NURSE PRACTITIONER

---

#### **MENDOZA, GRETEL MARIE**

Provider ID: 303202

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1245652387

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TH 8AM-6PM  
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### CERTIFIED NURSE PRACTITIONER

---

#### **MICK, SHARON**

Provider ID: 299647

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

#### **MICK, SHARON**

Provider ID: 299649

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

#### **MICK, SHARON**

Provider ID: 299648

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

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## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MIDORO, ABEGAILLE**

Provider ID: 303829

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (858) 578-4417

☎ After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1952925851

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MIDORO, ABEGAILLE**

Provider ID: 303828

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 9855 ERMA RD STE 105  
SAN DIEGO, CA 92131

☎ Phone: (844) 200-2426

Fax: (858) 536-8034

☎ After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1952925851

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MILLER, EVA**

Provider ID: 255833

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 330 LEWIS ST  
SAN DIEGO, CA 92103

☎ Phone: (619) 471-9210

☎ After Hours Phone: (619)  
471-9210

Provider Gender: Female

NPI: 1043492523

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MOHEBBI, ATHENA**

Provider ID: 201325

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE  
P2

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1952627176

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

**MORAN, TIFFANY**

Provider ID: 304275

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)

234-2158

Provider Gender: Female

NPI: 1730730649

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

**MULVEY, CAOILFHIONN**

Provider ID: 291419

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1184386864

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

**NEJATI, FRESHTA**

Provider ID: 214112

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1831598119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

**NETZEL, JENNIFER**

Provider ID: 291348

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92122  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1336896232

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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#### **NETZEL, JENNIFER**

Provider ID: 291346

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9333 GENESEE AVE  
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1336896232

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

#### **NETZEL, JENNIFER**

Provider ID: 291347

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1336896232

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

---

#### **NOVENO, HILARIO JR**

Provider ID: 286912

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4168 FRONT ST  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124486865

☑ Provider English Spoken: Y  
☑ Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,  
UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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#### **NOVENO, HILARIO JR**

Provider ID: 286911

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE  
P2

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273


Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **O'CONNELL, STEFANY**

Provider ID: 296846

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD  
SAN DIEGO, CA 92154


 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**


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#### **OREJEL, EDITH**

Provider ID: 296716

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1073278180

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**


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#### **OREJEL, EDITH**

Provider ID: 296715

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1073278180

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **ORPILLA, IMELDA**


Provider ID: 282962

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录







 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126  
 Phone: (844) 200-2426  
Fax: (858) 578-4417  
 After Hours Phone: (844)  
200-2426  
Provider Gender: Female  
NPI: 1790785988  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU  
8:30AM-5:30PM  
W 8:30AM-7PM  
TH-F 8:30AM-5:30PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER

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**ORPILLA, IMELDA**  
Provider ID: 243506  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 9995 CARMEL MOUNTAIN  
RD STE B10-B11  
SAN DIEGO, CA 92129  
 Phone: (214) 590-5306  
Fax: (858) 240-6470




 After Hours Phone: (214)  
590-5306  
Provider Gender: Female  
NPI: 1790785988  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER

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**PAI, SARAH**  
Provider ID: 276870  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1255762167  
 Provider English Spoken: Y  
Cultural Competency: N







Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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**PATIAG, DANIEL**  
Provider ID: 293249  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
810-8700  
Provider Gender: Male  
NPI: 1073169769  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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**PATIAG, DANIEL**  
Provider ID: 293248  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
📞 Phone: (858) 279-0925  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858)  
279-0925  
Provider Gender: Male  
NPI: 1073169769  
🗳 Provider English Spoken: Y  
🗳 Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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**PEREZ, ALLYSSA**  
Provider ID: 304162

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1497358915  
🗳 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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**PEREZ, ALLYSSA**  
Provider ID: 286223  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1497358915  
🗳 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---

**PEREZ, ALLYSSA**  
Provider ID: 286222  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1497358915  
🗳 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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**CERTIFIED NURSE**  
**PRACTITIONER**


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**PETTIS, BETH**

Provider ID: 286878

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1326638958

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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**CERTIFIED NURSE**  
**PRACTITIONER**

---


**RAJAEI, NILOUFAR**

Provider ID: 291437

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1275904047

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED NURSE**  
**PRACTITIONER**

---


**RANDLE, CARRIE**

Provider ID: 299296

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1558557348

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: NAVAL  
MEDICAL CTR SD RBE, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

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**CERTIFIED NURSE**  
**PRACTITIONER**


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**RIEGO, SUZANNE**

Provider ID: 214477

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3750 CONVOY ST STE 312  
SAN DIEGO, CA 92111

 Phone: (858) 292-7200


 After Hours Phone: (858)  
292-7200




Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录


NPI: 1144453754


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### **CERTIFIED NURSE PRACTITIONER**

#### **ROBERTSON, RACHAEL**

Provider ID: 286940  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1659912327




 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY



THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**



#### **RODENMEYER, EVE**


Provider ID: 295956  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
 Phone: (619) 280-2058  
Fax: (858) 633-4682  
 After Hours Phone: (619)  
280-2058  
Provider Gender: Female  
NPI: 1225782022



 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

#### **ROSCOE, SYDNEY**

Provider ID: 305039  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1992448864

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **ROSCOE, SYDNEY**

Provider ID: 305038  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 1992448864

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---


#### **ROSCOE, SYDNEY**

Provider ID: 305037

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1992448864

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **ROSS, CRYSTAL**

Provider ID: 287763

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 350 DICKINSON ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON, GROSSMONT  
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

Provider ID: 302559

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)  
563-0250

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON, GROSSMONT  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **ROSSI, CATHERINE**

Provider ID: 291445

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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### **CERTIFIED NURSE PRACTITIONER**

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#### **ROSS, CRYSTAL**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1649934126


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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#### **ROZO, JOSE**

Provider ID: 300037

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1528787132

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 293288

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


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#### **SABIN, NANCY**


Provider ID: 293287

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1285732586

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### **CERTIFIED NURSE PRACTITIONER**

---

#### **SABIN, NANCY**

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1285732586

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**


---

#### **SAMPSON, ANDRIECE**

Provider ID: 303282

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE  
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619)  
234-2158

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1619594124

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER


#### **SANACORA, RACHEL**

Provider ID: 297729

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1548987985

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A


IPA: Rady Childrens Health Network


### CERTIFIED NURSE PRACTITIONER


#### **SANACORA, RACHEL**

Provider ID: 297728

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1548987985

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network


### CERTIFIED NURSE PRACTITIONER

#### **SANTANGELO, JOANNE**

Provider ID: 293285

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1619370475

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### CERTIFIED NURSE PRACTITIONER

#### **SANTANGELO, JOANNE**

Provider ID: 293286

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1619370475

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER

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**SATTERWHITE, MAURINE**

Provider ID: 293258

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1225012842

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER

---

**SATTERWHITE, MAURINE**

Provider ID: 293259

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1225012842

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER

---

**SEARS-WILEY, ELIZABETH**

Provider ID: 276851

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 350 DICKINSON ST  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1215394382

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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**SELBY, BLAKE**

Provider ID: 246423

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 1417194358

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER


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#### **SELBY, BLAKE**

Provider ID: 256646

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1417194358

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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#### **SENA, TIFFANY**

Provider ID: 300229

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 550 WASHINGTON ST STE  
300

SAN DIEGO, CA 92103

 Phone: (619) 297-5437

Fax: (619) 297-4567

 After Hours Phone: (619)  
297-5437

Provider Gender: Female

NPI: 1710539523

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### CERTIFIED NURSE PRACTITIONER


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#### **SWARTZ, ERIN**

Provider ID: 255787

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (858) 657-8530

 After Hours Phone: (858)  
657-8530

Provider Gender: Female

NPI: 1639571292

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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## D. 专家名录

### TAING, JENNIFER

Provider ID: 201573

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1649528357

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### CERTIFIED NURSE PRACTITIONER

### TALBOT, ADRIANNE

Provider ID: 278183

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST STE 1A  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1992048557

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### CERTIFIED NURSE PRACTITIONER

### TIMBERMAN, SARAH

Provider ID: 295361

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)  
966-4003

Provider Gender: Female

NPI: 1144614066

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### CERTIFIED NURSE PRACTITIONER

### TOPPEN, LAURA

Provider ID: 215477

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### CERTIFIED NURSE

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## D. 专家名录

---

**PRACTITIONER**

**TREJO, ANA**  
Provider ID: 307672  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1033717194  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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**CERTIFIED NURSE PRACTITIONER**

**TUCKER, LANIKA**  
Provider ID: 307659  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1477325181  
☑ Provider English Spoken: Y

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

**CERTIFIED NURSE PRACTITIONER**

**TUCKER, LANIKA**  
Provider ID: 307657  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1477325181  
☑ Provider English Spoken: Y

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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**CERTIFIED NURSE PRACTITIONER**

**VIBAL-POASTER, MARIA**

Provider ID: 205651  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1376046680  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group


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**CERTIFIED NURSE PRACTITIONER**

**WALDRUP, LA RHONDA**  
Provider ID: 299260  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5888  
📠 Fax: (858) 966-7483  
🕒 After Hours Phone: (858) 966-5888  
Provider Gender: Female  
NPI: 1831627181

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PALOMAR  
MEDICAL CENTER, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **CERTIFIED NURSE PRACTITIONER**


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#### **WHITEHURST, UNIQUE**

Provider ID: 306075

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 286 EUCLID AVE STE 302  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 428-7952

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1124800214

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**


---

#### **WOO, ANDY**

Provider ID: 299916

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1609450550


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**

---


#### **ALFONSO, ALVIN**


Provider ID: 256374

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952653404

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**

---


#### **APPLEGET, JOSEPH**

Provider ID: 239602

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273


Provider Gender: Male




NPI: 1568980472

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RIVERSIDE COMMUNITY HOSP*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **CERTIFIED REGISTERED NURSE ANESTHETIST**



---

#### **BARBA, ARNEL**


*Provider ID: 262186*  
*Board Certified Specialty: No*  
*IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD*


 286 EUCLID AVE STE 109  
SAN DIEGO, CA 92114  
 *Phone: (619) 564-8249*  
 *After Hours Phone: (619) 564-8249*

*Provider Gender: Male*  
*NPI: 1750366928*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*  
 *Accessibility: CONTACT*

*PROVIDER*  
 *Website: N/A*  
*IPA: Imperial Health Holdings Medical Group-SD*



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### **CERTIFIED REGISTERED NURSE ANESTHETIST**

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#### **BAYLIS, CHRISTOPHER**

*Provider ID: 240763*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*



 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1174893358*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**



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#### **BILLINGTON, KATHERINE**


*Provider ID: 262246*  
*Board Certified Specialty: No*  
*IMPERIAL HEALTH HOLDINGS*

#### *MEDICAL GROUP-SD*

 286 EUCLID AVE STE 109  
SAN DIEGO, CA 92114

 *Phone: (619) 564-8249*  
 *After Hours Phone: (619) 564-8249*

*Provider Gender: Female*  
*NPI: 1962787366*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: Imperial Health Holdings Medical Group-SD*

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**

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#### **BOEING, KRISTINA**

*Provider ID: 274397*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1205134301*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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**CERTIFIED REGISTERED  
NURSE ANESTHETIST**

---

**BURROWS, TERENCE**

Provider ID: 256694

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1023194560


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE ANESTHETIST**


---

**DOLLAND, STEVEN**

Provider ID: 280552

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: KERN  
MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE ANESTHETIST**


---

**FERRITER, STACY**

Provider ID: 265295

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE ANESTHETIST**


---

**GARCIA, CALVIN**

Provider ID: 217365

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427419944

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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**CERTIFIED REGISTERED**  
**NURSE ANESTHETIST**

**GONZALEZ, LISA**

Provider ID: 299905

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083254205

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 291444

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED**  
**NURSE ANESTHETIST**

**MARSH, LINDSAY**

Provider ID: 291388

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003556184

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED**  
**NURSE ANESTHETIST**

**POLIKOWSKI, SAMANTHA**

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1194134114

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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**CERTIFIED REGISTERED**  
**NURSE ANESTHETIST**

**RAMIREZ, NICOLE**

Provider ID: 291404

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1487213500

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED REGISTERED NURSE ANESTHETIST**

---

#### **SACKS, BRENT**

Provider ID: 278003

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982133591

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED REGISTERED NURSE ANESTHETIST**

---

#### **VINCENT, BERLIN**

Provider ID: 291454

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1144987801

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **CHOI, NATHALIE**

Provider ID: 301714

📍 4168 FRONT ST  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1073241618

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER,

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **CHOI, NATHALIE**

Provider ID: 301715

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER,

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---


#### **EKHOLM, JANNA**

Provider ID: 290584

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)  
563-0250

Provider Gender: Female

NPI: 1588977151

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---


#### **GOODWIN, RACHEL**


Provider ID: 210018

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST



SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---


#### **GOODWIN, RACHEL**


Provider ID: 210019

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **GREAR MANN, MELISSA**

Provider ID: 210053

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1255384475


Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


---

**CERTIFIED REGISTERED**  
**NURSE MIDWIFE**

**GREAR MANN, MELISSA**

Provider ID: 210052

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1255384475


Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED**  
**NURSE MIDWIFE**

**GUNTHER, HOPE**

Provider ID: 210041

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1285667741


Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED**  
**NURSE MIDWIFE**

**HIRSCH, JENNIFER**

Provider ID: 210058

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1891752069

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group




---

**CERTIFIED REGISTERED**  
**NURSE MIDWIFE**

**HIRSCH, JENNIFER**

Provider ID: 210055

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (619) 543-7878  
 After Hours Phone: (619)  
543-7878

Provider Gender: Female  
NPI: 1891752069

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **HIRSCH, JENNIFER**

Provider ID: 210054  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 200 W ARBOR DR  
 SAN DIEGO, CA 92103  
 Phone: (619) 543-7878  
 After Hours Phone: (619)  
 543-7878  
 Provider Gender: Female  
 NPI: 1891752069

Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

Website: N/A  
 IPA: UCSD Medical Group

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **NATHAN, CARLY**

Provider ID: 301047  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 200 W ARBOR DR  
 SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
 926-8273

Provider Gender: Female  
 NPI: 1235670977

Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A  
 IPA: UCSD Medical Group

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **NATHAN, CARLY**

Provider ID: 301048  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 3750 CONVOY ST STE 312  
 SAN DIEGO, CA 92111  
 Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
 926-8273

Provider Gender: Female  
 NPI: 1235670977

Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

Accessibility: CONTACT  
 PROVIDER

Website: N/A  
 IPA: UCSD Medical Group

### **CHIROPRACTOR**

#### **BUI, MAI**

Provider ID: 289496  
 Board Certified Specialty: No  
 IMPERIAL HEALTH HOLDINGS  
 MEDICAL GROUP-SD  
 10717 CAMINO RUIZ STE 137  
 SAN DIEGO, CA 92126  
 Phone: (619) 692-3211  
 Fax: (619) 640-3211  
 After Hours Phone: (619)  
 692-3211

Provider Gender: Female  
 NPI: 1780901264


Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M 9AM-6PM  
W 9AM-6PM  
F 9AM-2PM**

 **Website: N/A**

**IPA: IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD**

---

### CHIROPRACTOR

---


**BUI, MAI**

**Provider ID: 295791**

**Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP**

 **5354 UNIVERSITY AVE STE  
3**

**SAN DIEGO, CA 92105**

 **Phone: (619) 692-3211**

**Fax: (619) 640-3211**

 **After Hours Phone: (619)  
692-3211**

**Provider Gender: Female**

**NPI: 1780901264**

 **Provider English Spoken: Y**

 **Provider Language(s)  
Spoken: Vietnamese**


**Cultural Competency: N**


**Medi-Cal Open Panel: Yes**


**Min/Max Age: 0\None**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT  
PROVIDER**

 **Hours: M-F 9AM-5PM**

 **Website: N/A**

**IPA: IHP of Southern Cal-PHP,**

**Imperial Health Holdings  
Medical Group-SD**

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### CHIROPRACTOR

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**BUI, MAI**

**Provider ID: 125052**

**Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD**

 **5354 UNIVERSITY AVE STE  
3**

**SAN DIEGO, CA 92105**

 **Phone: (619) 692-3211**

**Fax: (619) 640-3211**

 **After Hours Phone: (619)  
692-3211**

**Provider Gender: Female**

**NPI: 1780901264**

 **Provider English Spoken: Y**

 **Provider Language(s)  
Spoken: Vietnamese**

**Cultural Competency: N**


**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\None**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT  
PROVIDER**

 **Hours: M-F 9AM-5PM**

 **Website: N/A**

**IPA: IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD**

---

### CHIROPRACTOR


---

**CASTRO, DAVID**

**Provider ID: 293322**

**Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP**

 **1016 OUTER RD  
SAN DIEGO, CA 92154**

 **Phone: (619) 429-3733**


**Fax: (619) 628-5550**

 **After Hours Phone: (619)  
429-3733**

**Provider Gender: Male**

**NPI: 1841557733**

 **Provider English Spoken: Y**

 **Provider Language(s)  
Spoken: Spanish**

**Cultural Competency: N**


**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\None**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT  
PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

**IPA: IHP of Southern Cal-PHP**

---

### CHIROPRACTOR

---


**GILIBERTO, JOSEPH**

**Provider ID: 291546**

**Board Certified Specialty: No  
COMMUNITY CARE IPA LLC**

 **9995 CARMEL MOUNTAIN  
RD STE D**

**SAN DIEGO, CA 92129**

 **Phone: (844) 200-2426**

**Fax: (619) 399-5959**

 **After Hours Phone: (844)  
200-2426**

**Provider Gender: Male**

**NPI: 1821463159**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### CHIROPRACTOR

---

#### GILIBERTO, JOSEPH

Provider ID: 291547

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844)  
200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### CHIROPRACTOR

---

#### LUU, DANIEL

Provider ID: 269883

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

4419 EUCLID AVE STE 105  
SAN DIEGO, CA 92115

Phone: (619) 287-1235

Fax: (619) 255-6406

After Hours Phone: (619)  
287-1235

Provider Gender: Male

NPI: 1225108269

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 10AM-6PM

TU 10AM-2PM

W 10AM-6PM

TH 10AM-2PM

F 10AM-6PM

Website: N/A

IPA: Community Care IPA LLC

---

### CHIROPRACTOR

---

#### ROBINSON, DEAN

Provider ID: 300848

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)  
563-0250

Provider Gender: Male

NPI: 1851320337

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

---

### CHIROPRACTOR

---

#### ROBINSON, DEAN

Provider ID: 300847

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680





After Hours Phone: (858)  
279-0925

Provider Gender: Male

NPI: 1851320337






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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### DERMATOLOGY






#### **CALAME, ANTOANELLA**



Provider ID: 290301  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6605 NANCY RIDGE DR  
SAN DIEGO, CA 92121  
 Phone: (858) 750-2983  
Fax: (858) 900-2772  
 After Hours Phone: (858)  
750-2983  
Provider Gender: Female  
NPI: 1285817569  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Romanian  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, YUMA  
REGIONAL MEDICAL CENTER  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### DERMATOLOGY








#### **KANNAN, SWATI**

Provider ID: 286287  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 8899 UNIVERSITY CENTER  
LN STE 350  
SAN DIEGO, CA 92122  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1508155227  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RONALD  
REAGAN UCLA MED CTR,  
SANTA MONICA UCLA MED  
CTR, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### DERMATOLOGY

#### **KAUNITZ, GENEVIEVE**

Provider ID: 285011  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 8899 UNIVERSITY CENTER  
LN STE 350  
SAN DIEGO, CA 92122  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1053734905  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### DERMATOLOGY

#### **KOZMA, BONITA**

Provider ID: 269301

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN STE 350  
SAN DIEGO, CA 92122  
Phone: (858) 657-8322  
Fax: (888) 539-8781

After Hours Phone: (858)  
657-8322

Provider Gender: Female  
NPI: 1659654598

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
PROVIDENCE SAINT JOHNS  
HEALTH CENTER, SANTA  
MONICA UCLA MED CTR,  
RONALD REAGAN UCLA MED  
CTR, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### DERMATOLOGY

**LIU, YUJIE**

Provider ID: 308315

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1750944450

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### DERMATOLOGY

**SHI, VERONICA**

Provider ID: 271713

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN STE 350  
SAN DIEGO, CA 92122

Phone: (858) 657-8322

Fax: (888) 539-8781

After Hours Phone: (858)  
657-8322

Provider Gender: Female  
NPI: 1366897464

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### DERMATOLOGY

**SHI, VERONICA**

Provider ID: 286335

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1366897464

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。








## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---

### DERMATOLOGY







#### **SINGH, GAURAV**

*Provider ID: 272612*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8899 UNIVERSITY CENTER LN STE 350  
SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1184073801*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### DERMATOLOGY




#### **STERN, MARLEIGH**

*Provider ID: 306888*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1710447883*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



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### DERMATOLOGY

#### **ZUBAIR, RAHEEL**

*Provider ID: 306520*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 9339 GENESEE AVE STE 350  
SAN DIEGO, CA 92121  
 *Phone: (858) 454-4300*  
*Fax: (858) 454-5088*  
 *After Hours Phone: (858) 454-4300*  
*Provider Gender: Male*





*NPI: 1326493024*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

---

### EMERGENCY MEDICINE

#### **AMANN, CHRISTOPHER**

*Provider ID: 270913*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1134326895*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **AUSTIN, ANDREA**

Provider ID: 269291

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1811289093

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, GROSSMONT

HOSPITAL, Los Angeles

General Medical Center,  
TEMECULA VALLEY HOSPITAL  
INC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **BAGBY, JESSICA**

Provider ID: 271136

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **BARRY, JEFFREY**

Provider ID: 271130

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (855) 535-5864

Fax: (888) 539-8781

 After Hours Phone: (855)  
535-5864

Provider Gender: Male

NPI: 1801207006

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **BARRY, JEFFREY**

Provider ID: 271132

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

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## D. 专家名录

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801207006*

☑ *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **BARRY, JEFFREY**

*Provider ID: 271129*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

📍 *4520 EXECUTIVE DR STE P2*

*SAN DIEGO, CA 92121*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801207006*

☑ *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **BELLINGHAUSEN, AMY**

*Provider ID: 270333*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

📍 *4520 EXECUTIVE DR STE P2*

*SAN DIEGO, CA 92121*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1801206354*

☑ *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CORONADO HOSP AND  
HEALTHCARE CTR, SHARP*

*MEMORIAL HOSPITAL, UCSD*

*LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **BELLINGHAUSEN, AMY**

*Provider ID: 270336*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

📍 *200 W ARBOR DR*

*SAN DIEGO, CA 92103*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1801206354*

☑ *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CORONADO HOSP AND*

*HEALTHCARE CTR, SHARP*

*MEMORIAL HOSPITAL, UCSD*

*LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*


*American Sign Language (ASL):*

*N*

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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**

#### **BELLINGHAUSEN, AMY**

*Provider ID: 270334*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4168 FRONT ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1801206354*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, SHARP  
MEMORIAL HOSPITAL, UCSD  
LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**

#### **CASTELLANO, TIFFANY**

*Provider ID: 301706*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1063893063*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**

#### **CASTELLANO, TIFFANY**

*Provider ID: 279314*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1063893063*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **CHEN, ALICE**

*Provider ID: 287430*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*


*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1427476597*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*


*American Sign Language (ASL):*

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **CHEN, ALICE**

*Provider ID: 287428*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1427476597*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Mandarin*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**


#### **COLLINS, CATHLEEN**

*Provider ID: 285133*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)  
966-8800*

*Provider Gender: Female*

*NPI: 1205128089*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: LUCILE*

*SALTER PACKARD*

*CHILDRENS HOSP, Stanford  
Health Care, RADY*

*CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

### **EMERGENCY MEDICINE**


#### **COYNE, CHRISTOPHER**

*Provider ID: 303036*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (619) 543-7051*

*Fax: (619) 543-3115*

 *After Hours Phone: (619)  
543-7051*

*Provider Gender: Male*

*NPI: 1043590169*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON, RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO, EL CENTRO*

*REGIONAL MEDICAL CENTER*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**


#### **GUITTARD, JESSE**


*Provider ID: 239879*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103




 *Phone: (619) 543-6400*

 *After Hours Phone: (619)*




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## D. 专家名录

543-6400  
Provider Gender: Male  
NPI: 1770979890  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

**HERNANDEZ, CRISTINA**  
Provider ID: 242544  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1164765046  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA






JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


**HOGUE, BRENNIA**  
Provider ID: 301711  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1043705296  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


**HORNBEAK, KIRSTEN**  
Provider ID: 240022  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1205214442  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

**KUTZ, CRAIG**  
Provider ID: 283845  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male  
NPI: 1598295925


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR, TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **LIOTTA, BENJAMIN**

Provider ID: 285630



Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male  
NPI: 1396270278

 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Chinese


Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **MCDANIEL, MICHELE**

Provider ID: 246901

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1366761959

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **NOSTE, ERIN**

Provider ID: 239797

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

 After Hours Phone: (619) 543-6400

Provider Gender: Female  
NPI: 1871732214

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):


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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**


#### **NOSTE, ERIN**

*Provider ID: 239798*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 *Phone: (858) 605-4441*

 *After Hours Phone: (858)  
605-4441*

*Provider Gender: Female*

*NPI: 1871732214*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS*

*HOSPITAL SAN DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
IPA: UCSD Medical Group*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: SU 8AM-10PM  
M-F 8AM-5PM*

*SA 8AM-10PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **PARK, JAY**

*Provider ID: 285607*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1366478372*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**

#### **PHAM, LILY**

*Provider ID: 304937*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123


 *Phone: (858) 966-8800*

 *After Hours Phone: (858)  
966-8800*

*Provider Gender: Female*

*NPI: 1811423072*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

### **EMERGENCY MEDICINE**


#### **PHAM, LILY**

*Provider ID: 304933*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 *Phone: (619) 280-2905*

*Fax: (619) 283-1614*

 *After Hours Phone: (619)  
280-2905*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 1811423072

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **EMERGENCY MEDICINE**

#### **RUDOLF, FRANCES**

Provider ID: 240159

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (858) 657-7000

After Hours Phone: (858)  
657-7000

Provider Gender: Female

NPI: 1821487430

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **SABHA, MAHMOUD**

Provider ID: 243441

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1457747883

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **SLOANE, CHRISTIAN**

Provider ID: 209518

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1841233145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **TANAKA, HIDEAKI**

Provider ID: 240124

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124280730

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: EL


CENTRO REGIONAL MEDICAL  
CENTER, Sharp Grossmont  
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 8AM-8PM  
M-F 8AM-5PM  
SA 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **YOU, ALAN**

Provider ID: 269936

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1225425697

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **YU, ELAINE**

Provider ID: 301708

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1528564150

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **ENDOCRINOLOGY**


### **METABOLISM DIABETES**

#### **BOEDER, SCHAFFER**

Provider ID: 255611

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1477808285

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

#### **EKANAYAKE, PREETHIKA**

Provider ID: 284813

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)

Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

#### **EKANAYAKE, PREETHIKA**

Provider ID: 284812

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)

Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

#### **JUANG, PATRICIA**

Provider ID: 255605

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (858) 657-7298

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265695795

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

#### **KULASA, KRISTEN**

Provider ID: 255622

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (619) 543-6500

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932324175

Provider English Spoken: Y


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## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **ENDOCRINOLOGY** **METABOLISM DIABETES**


**NAGELBERG, JODI**

Provider ID: 287780

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ENDOCRINOLOGY** **METABOLISM DIABETES**

**NAGELBERG, JODI**

Provider ID: 287781

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ENDOCRINOLOGY** **METABOLISM DIABETES**


**NAGELBERG, JODI**

Provider ID: 287779

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ENDOCRINOLOGY** **METABOLISM DIABETES**

**NAGELBERG, JODI**

Provider ID: 287782

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes




Min/Max Age: 18\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### ENDOCRINOLOGY




#### METABOLISM DIABETES

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#### **SANTOS CAVAIOLA, TRICIA**

*Provider ID: 256091*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (858) 657-7298*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1518163799*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*

N



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### ENDOCRINOLOGY



#### METABOLISM DIABETES

#### **TANTISIRA, LALITA**

*Provider ID: 286323*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4303 LA JOLLA VILLAGE DR STE 2110  
SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1508874298*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Thai*

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*



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### ENDOCRINOLOGY


#### METABOLISM DIABETES

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#### **VALDEZ, KRYSTAL**

*Provider ID: 299743*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 10737 CAMINO RUIZ STE 235  
SAN DIEGO, CA 92126  
 *Phone: (844) 200-2426*

*Fax: (858) 578-4417*

 *After Hours Phone: (844) 200-2426*

*Provider Gender: Female*  
*NPI: 1629480272*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish, Tagalog*


*Cultural Competency: N*

*Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\100*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*




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### ENDOCRINOLOGY

#### METABOLISM DIABETES

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#### **VALDEZ, KRYSTAL**

*Provider ID: 299363*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 10737 CAMINO RUIZ STE 235  
SAN DIEGO, CA 92126  
 *Phone: (844) 200-2426*  
*Fax: (858) 578-4417*  
 *After Hours Phone: (844)*

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## D. 专家名录

200-2426  
Provider Gender: Female  
NPI: 1629480272  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: TWIN  
CITIES COMMUNITY  
HOSPITAL, SIERRA VISTA  
REGIONAL MED CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**  
Provider ID: 301761  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
 Phone: (619) 662-4100  
Fax: (619) 595-0258  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Male  
NPI: 1588197826  
 Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL, PARADISE VALLEY  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**BELL, TRACY**  
Provider ID: 304813  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
279-0925  
Provider Gender: Female  
NPI: 1497821318  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\None

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**BELL, TRACY**  
Provider ID: 304814  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
810-8700

Provider Gender: Female  
NPI: 1497821318  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**BERNADETT, ALEX**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 296739  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

6699 ALVARADO RD STE  
2100

SAN DIEGO, CA 92120

Phone: (619) 229-3909

Fax: (619) 229-3902

After Hours Phone: (619)  
229-3909

Provider Gender: Male

NPI: 1215382841

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **FAMILY PRACTICE**

#### **BERNADETT, ALEX**

Provider ID: 296740

Board Certified Specialty: No  
UCSD MEDICAL GROUP

10505 SORRENTO VALLEY  
RD STE 200

SAN DIEGO, CA 92121

Phone: (858) 793-7860

Fax: (858) 436-1289

After Hours Phone: (858)

793-7860

Provider Gender: Male

NPI: 1215382841

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **FAMILY PRACTICE**

#### **CAMPBELL, BRIANNA**

Provider ID: 298950

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE  
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1316479892

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: CHULA  
VISTA COMM HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **CHEN, ALICE**

Provider ID: 207167

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1265810337

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>CHEN, ALICE</b> Provider ID: 207164 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1265810337 Provider English Spoken: Y Provider Language(s) Spoken: Chinese Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	200 SAN DIEGO, CA 92121 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1265810337 Provider English Spoken: Y Provider Language(s) Spoken: Chinese Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	NPI: 1467434811 Provider English Spoken: Y Provider Language(s) Spoken: French, Spanish Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM Website: N/A IPA: IHP of Southern Cal-PHP
<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>CHEN, ALICE</b> Provider ID: 207163 Board Certified Specialty: No UCSD MEDICAL GROUP 9333 GENESEE AVE STE	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>HILL, LINDA</b> Provider ID: 293210 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 6973 LINDA VISTA RD SAN DIEGO, CA 92111 Phone: (858) 279-0925 Fax: (858) 633-4680 After Hours Phone: (858) 279-0925 Provider Gender: Female	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>HILL, LINDA</b> Provider ID: 293211 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 7011 LINDA VISTA RD SAN DIEGO, CA 92111 Phone: (858) 810-8700 Fax: (858) 633-4680 After Hours Phone: (858) 810-8700 Provider Gender: Female NPI: 1467434811 Provider English Spoken: Y Provider Language(s) Spoken: French, Spanish Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### FAMILY PRACTICE


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#### **JOHN, TANNER**

Provider ID: 303515

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1043707326


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### FAMILY PRACTICE


---


#### **JOLICOEUR, MEGAN**

Provider ID: 300060

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1114366192

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### FAMILY PRACTICE


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#### **JOLICOEUR, MEGAN**

Provider ID: 300057

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN STE 350

 Phone: (858) 249-6890

 After Hours Phone: (858)  
249-6890

Provider Gender: Female

NPI: 1114366192

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### FAMILY PRACTICE

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#### **JOLICOEUR, MEGAN**

Provider ID: 300059

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9909 MIRA MESA BLVD  
STE 200

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1114366192

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### FAMILY PRACTICE

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#### **JOLICOEUR, MEGAN**

Provider ID: 300058

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9333 GENESEE AVE  
SAN DIEGO, CA 92121  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### FAMILY PRACTICE

### KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### FAMILY PRACTICE

### KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### FAMILY PRACTICE

### MCLAUGHLIN, ERIK

Provider ID: 303847

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0505

After Hours Phone: (619) 234-2158

Provider Gender: Male

NPI: 1861637217

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### FAMILY PRACTICE

### PERESS, LILIA

Provider ID: 304277

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1275945446

Provider English Spoken: Y  
Provider Language(s)




Spoken: Ukrainian

Cultural Competency: N


Hospital Affiliation: SHARP


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MEMORIAL HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**PERESS, LILIA**  
 Provider ID: 304276  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 Fax: (858) 633-4680  
 After Hours Phone: (858)  
 810-8700  
 Provider Gender: Female  
 NPI: 1275945446  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Ukrainian  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MEMORIAL HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM




 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**



**RISSER, JOSEPH**  
 Provider ID: 293216  
 Board Certified Specialty: Yes  
 IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 Fax: (858) 633-4680  
 After Hours Phone: (858)  
 279-0925  
 Provider Gender: Male  
 NPI: 1952386765  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**RISSER, JOSEPH**  
 Provider ID: 293217  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 Fax: (858) 633-4680  
 After Hours Phone: (858)


810-8700  
 Provider Gender: Male  
 NPI: 1952386765  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

**ROSADO, IVAN**  
 Provider ID: 299244  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 316 25TH ST  
 SAN DIEGO, CA 92102  
 Phone: (619) 662-4100  
 Fax: (619) 238-3807  
 After Hours Phone: (619)  
 662-4100  
 Provider Gender: Male  
 NPI: 1316479603  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: SU 8:30AM-5:30PM  
 M-F 8:30AM-5:30PM








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 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SA 8:30AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **SCOTT, LAGINA**

Provider ID: 302648  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 292 EUCLID AVE STE 210  
SAN DIEGO, CA 92114  
 Phone: (619) 662-4100  
Fax: (619) 263-9601  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1558897009  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **SUMMERS-DAY, COURTNEY**




Provider ID: 290976  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP  
 1016 OUTER RD  
SAN DIEGO, CA 92154  
 Phone: (619) 429-3733

Fax: (619) 628-5550  
 After Hours Phone: (619)  
429-3733  
Provider Gender: Female  
NPI: 1124288873  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**







#### **VAN PRATT LEVIN, BENJAMIN**

Provider ID: 302531  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1016 OUTER RD  
SAN DIEGO, CA 92154  
 Phone: (619) 429-3733  
Fax: (619) 328-5550  
 After Hours Phone: (619)  
429-3733  
Provider Gender: Male  
NPI: 1619438330  
 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**



#### **VO, PHU LUONG**

Provider ID: 303332  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1043849177  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish,  
Vietnamese  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE GERIATRIC MEDICINE**

#### **MILLER, SCOTT**

Provider ID: 271539  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 9878 CARMEL MOUNTAIN  
RD STE B  
SAN DIEGO, CA 92129  
 Phone: (858) 312-1440  
Fax: (760) 788-7983  
 After Hours Phone: (858)  
312-1440  
Provider Gender: Male  
NPI: 1104845536  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: Community Care IPA LLC

### **FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

#### **LUKACZ, EMILY**


Provider ID: 256956  
Board Certified Specialty: No

### UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE  
360  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750339446

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

#### **LUKACZ, EMILY**

Provider ID: 256955  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750339446

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **ANAND, GOBIND**

Provider ID: 304187  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1861626814

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **GASTROENTEROLOGY**


#### **ANAND, GOBIND**

*Provider ID: 272837*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *200 W ARBOR DR  
SAN DIEGO, CA 92103*

 *Phone: (619) 543-2347*  
*Fax: (858) 657-7259*

 *After Hours Phone: (619)  
543-2347*

*Provider Gender: Male*

*NPI: 1861626814*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: UCSD  
MEDICAL CTR*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **GASTROENTEROLOGY**


#### **BAUMAN, LAURA**

*Provider ID: 260041*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH*

#### **NETWORK**

 *3030 CHILDRENS WAY FL  
2  
SAN DIEGO, CA 92123*

 *Phone: (858) 966-4003*  
*Fax: (858) 560-6798*

 *After Hours Phone: (858)  
966-4003*

*Provider Gender: Female*

*NPI: 1255697850*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN*

*DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health*

*Network*

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### **GASTROENTEROLOGY**

#### **DAVE, SHRAVAN**

*Provider ID: 304204*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *6655 ALVARADO RD  
SAN DIEGO, CA 92120*

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1588081814*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **GASTROENTEROLOGY**

#### **DAVE, SHRAVAN**

*Provider ID: 270450*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *4510 EXECUTIVE DR STE 7  
SAN DIEGO, CA 92121*

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1588081814*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

























 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

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## D. 专家名录

<hr/> <b>GASTROENTEROLOGY</b> <hr/> <b>HASAN, AWS</b> Provider ID: 299951 Board Certified Specialty: No UCSD MEDICAL GROUP  200 W ARBOR DR SAN DIEGO, CA 92103  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1780047597  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group	966-4003 Provider Gender: Female NPI: 1548521511  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network	CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network
<hr/> <b>GASTROENTEROLOGY</b> <hr/> <b>HILDRETH, AMBER</b> Provider ID: 280464 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123  Phone: (858) 966-4003 Fax: (858) 560-6798  After Hours Phone: (858)	<hr/> <b>GASTROENTEROLOGY</b> <hr/> <b>KUMAR, SOMA</b> Provider ID: 205377 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  3030 CHILDRENS WAY FL 2 SOUTH SAN DIEGO, CA 92123  Phone: (858) 966-4003 Fax: (858) 560-6798  After Hours Phone: (858) 966-4003 Provider Gender: Female NPI: 1356502520  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY	<hr/> <b>GASTROENTEROLOGY</b> <hr/> <b>NOVO, MEGAN</b> Provider ID: 296066 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  292 EUCLID AVE STE 115 SAN DIEGO, CA 92114  Phone: (619) 266-3332 Fax: (619) 266-6006  After Hours Phone: (619) 266-3332 Provider Gender: Female NPI: 1770961971  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF

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## D. 专家名录

CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### GASTROENTEROLOGY

#### **POLK, DAVID**

Provider ID: 275449  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 2  
 SAN DIEGO, CA 92123  
 Phone: (760) 294-9260  
 Fax: (760) 294-9274  
 After Hours Phone: (760) 294-9260  
 Provider Gender: Male  
 NPI: 1427140839  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

### GASTROENTEROLOGY

#### **REDDY, JOSEPH**

Provider ID: 290034  
 Board Certified Specialty: Yes  
 IHP OF SOUTHERN CAL-PHP  
 6699 ALVARADO RD STE 2301  
 SAN DIEGO, CA 92120  
 Phone: (619) 588-4074  
 Fax: (619) 588-4004  
 After Hours Phone: (619) 588-4074  
 Provider Gender: Male  
 NPI: 1245215391  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi, Spanish, Telugu  
 Cultural Competency: N  
 Hospital Affiliation: GROSSMONT HOSPITAL, UCSD MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT

#### **PROVIDER**

Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD


### GASTROENTEROLOGY

#### **REDDY, JOSEPH**

Provider ID: 27748  
 Board Certified Specialty: Yes  
 ADVANCED ENDOSCOPY CONSULTANTS INC  
 6699 ALVARADO RD STE 2301  
 SAN DIEGO, CA 92120  
 Phone: (619) 588-4074  
 Fax: (619) 588-4004  
 After Hours Phone: (619) 588-4074  
 Provider Gender: Male  
 NPI: 1245215391  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi, Spanish, Telugu  
 Cultural Competency: N  
 Hospital Affiliation: GROSSMONT HOSPITAL, UCSD MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD


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### **GASTROENTEROLOGY**

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#### **SHAFFER, KATHERINE**


Provider ID: 295712  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 292 EUCLID AVE STE 115  
SAN DIEGO, CA 92114

 Phone: (619) 266-3332  
Fax: (619) 266-6000


 After Hours Phone: (619)  
266-3332

Provider Gender: Female  
NPI: 1336405695

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PARADISE  
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **GASTROENTEROLOGY**


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#### **SHAH, SHAILJA**

Provider ID: 304178


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1073803243


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **GASTROENTEROLOGY**


---

#### **SHAH, SHAILJA**

Provider ID: 283896


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1073803243

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **GASTROENTEROLOGY**


---

#### **TSAI, MATTHEW**

Provider ID: 304196


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1285051177

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **GASTROENTEROLOGY**

**YOUSSEF, FADY**

Provider ID: 304186

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1265887723

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **GASTROENTEROLOGY**


**YOUSSEF, FADY**

Provider ID: 300024

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **GENERAL PRACTICE**

**BORRERO, MARCOS**

Provider ID: 125077

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

 3490 PALM AVE  
SAN DIEGO, CA 92154


 Phone: (619) 423-5616  
Fax: (619) 423-5684

 After Hours Phone: (619)  
423-5616

Provider Gender: Male

NPI: 1952312621

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Imperial Health Holdings  
Medical Group-SD

---


### **GENETICS CLINICAL**

**REIMERS, REBECCA**

Provider ID: 302348

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 966-5840  
Fax: (858) 966-8550

 After Hours Phone: (858)  
966-5840

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### GENETICS CLINICAL

#### **REIMERS, REBECCA**

Provider ID: 294650

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


### GENETICS MEDICAL

#### **DEL CAMPO CASANELLES, MIGUEL**

Provider ID: 206013

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123


 Phone: (858) 966-5840


Fax: (858) 966-4064

 After Hours Phone: (858)  
966-5840

Provider Gender: Male

NPI: 1598141475

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French, Italian,  
Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### GENETICS MEDICAL

#### **NIEMI, ANNA-KAISA**

Provider ID: 307094

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 966-5840


Fax: (858) 966-8550

 After Hours Phone: (858)  
966-5840

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Finnish, French,  
German, Spanish, Swedish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health Network

---

**HEARING AID DEALER /  
SUPPLIER**

---

**ANDERSON, ELAINE**

Provider ID: 268691

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

9340 CLAIREMONT MESA  
BLVD STE D  
SAN DIEGO, CA 92123

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858)  
278-9911

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

**HEARING AID DEALER /  
SUPPLIER**

---

**ANDERSON, ELAINE**

Provider ID: 268689

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6367 ALVARADO CT STE

101

SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)  
583-7002

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

**HEARING AID DEALER /  
SUPPLIER**

---

**DAVIS, KELLE**

Provider ID: 268652

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6367 ALVARADO CT STE  
101

SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)  
583-7002

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

**HEARING AID DEALER /  
SUPPLIER**

---

**DAVIS, KELLE**

Provider ID: 268653

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

9340 CLAIREMONT MESA  
BLVD STE D

SAN DIEGO, CA 92123

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858)  
278-9911

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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## D. 专家名录

### **HEMATOLOGY / ONCOLOGY**

#### **CHEN, YU-WEI**

Provider ID: 303059

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **HEMATOLOGY / ONCOLOGY**

#### **LEE, KAREN**

Provider ID: 284165

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)  
966-5811

Provider Gender: Female

NPI: 1518352970

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **HEMATOLOGY / ONCOLOGY**

#### **NGUYEN, ANTHONY**

Provider ID: 301060

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1295153575

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **HEMATOLOGY / ONCOLOGY**

#### **PAUL, MEGAN**

Provider ID: 274499

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3010 CHILDRENS WAY STE  
2W

SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)  
966-5811

Provider Gender: Female

NPI: 1427495894

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### HEMATOLOGY / ONCOLOGY

#### **VU, PETER**

Provider ID: 272716

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1861810830

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **ZHOU, JENNY**

Provider ID: 273188

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9333 GENESEE AVE STE  
310

SAN DIEGO, CA 92121

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1598007924

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / PATHOLOGY

#### **WANG, HUAN YOU**

Provider ID: 247585

Board Certified Specialty: No  
UCSD MEDICAL GROUP

10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1689633729

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### HEMATOLOGY / PATHOLOGY

#### **WANG, HUAN YOU**

Provider ID: 247583

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1689633729

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HEPATOLOGY


#### **BARMAN, PRANAB**


Provider ID: 241953

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE 315


SAN DIEGO, CA 92121


 Phone: (800) 826-5273

 After Hours Phone: (800) 826-5273

Provider Gender: Male

NPI: 1023301991

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

### HOSPICE AND PALLIATIVE MEDICINE


#### **RUBENZI, TAMARA**

Provider ID: 245573

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HOSPICE AND PALLIATIVE MEDICINE

#### **RUBENZI, TAMARA**

Provider ID: 276671

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### HOSPITALIST MD/DO


#### **CHILDERS, DIANA**

Provider ID: 275068

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 1033128376

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **HOSPITALIST MD/DO**

---

#### **FIRESTEIN, CATHERINE**

Provider ID: 275387

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427348382

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **HOSPITALIST MD/DO**

---

#### **HAMMOND, CHARLES**


Provider ID: 278588

Board Certified Specialty: No


UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033641816

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **HOSPITALIST MD/DO**

---

#### **SHINDO, YURI**

Provider ID: 284743

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1700271939

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### HOSPITALIST MD/DO

#### **TONG, ALEXANDER**

Provider ID: 300045

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1356804926

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### INFECTIOUS DISEASE

#### **ALDOUS, JEANNETTE**

Provider ID: 290420

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE  
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-6384

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1073650339

Provider English Spoken: Y N

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### INFECTIOUS DISEASE

#### **BAMFORD, LAURA**

Provider ID: 276546

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST FL 3  
SAN DIEGO, CA 92103

Phone: (619) 543-6382

Fax: (888) 539-8781

After Hours Phone: (619)  
543-6382

Provider Gender: Female

NPI: 1750435996

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### INFECTIOUS DISEASE

#### **DEISS, ROBERT**

Provider ID: 258330

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST FL 3  
SAN DIEGO, CA 92103

Phone: (619) 543-3995

After Hours Phone: (619)  
543-3995

Provider Gender: Male

NPI: 1194977652

Provider English Spoken: Y  
Provider Language(s)

Spoken: Portuguese,  
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录

<hr/> <b>INFECTIOUS DISEASE</b> <hr/> <b>HORTON, LUCY</b> Provider ID: 240887 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎ Phone: (800) 926-8273 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1427324821 🗣 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: UCSD Medical Group	<i>Fax: (888) 539-8781</i> 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1538346317 🗣 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group	JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: UCSD Medical Group
<hr/> <b>INFECTIOUS DISEASE</b> <hr/> <b>MARTIN, THOMAS</b> Provider ID: 277225 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 4168 FRONT ST FL 3 SAN DIEGO, CA 92103 ☎ Phone: (619) 543-5890 Fax: (888) 539-8781 🕒 After Hours Phone: (619) 543-5890 Provider Gender: Male NPI: 1093193583 🗣 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER	<hr/> <b>INFECTIOUS DISEASE</b> <hr/> <b>MARTIN, THOMAS</b> Provider ID: 277226 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎ Phone: (800) 926-8273 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1093193583 🗣 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA	<hr/> <b>INFECTIOUS DISEASE</b> <hr/> <b>MARTIN, THOMAS</b> Provider ID: 277225 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 4168 FRONT ST FL 3 SAN DIEGO, CA 92103 ☎ Phone: (619) 543-5890 Fax: (888) 539-8781 🕒 After Hours Phone: (619) 543-5890 Provider Gender: Male NPI: 1093193583 🗣 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER
<hr/> <b>INFECTIOUS DISEASE</b> <hr/> <b>KUPPALLI, KRUTIKA</b> Provider ID: 301058 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎ Phone: (800) 926-8273	<hr/> <b>INFECTIOUS DISEASE</b> <hr/> <b>MARTIN, THOMAS</b> Provider ID: 277226 Board Certified Specialty: No UCSD MEDICAL GROUP 📍 200 W ARBOR DR SAN DIEGO, CA 92103 ☎ Phone: (800) 926-8273 Fax: (888) 539-8781 🕒 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1093193583 🗣 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PROVIDER


 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### INFECTIOUS DISEASE

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#### MOODLEY, AMARAN

Provider ID: 208558  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
 Phone: (885) 966-7785  
Fax: (858) 966-8658  
 After Hours Phone: (885) 966-7785  
Provider Gender: Male  
NPI: 1104023670  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

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### INFECTIOUS DISEASE

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#### PANNARAJ, PIA

Provider ID: 301026  
Board Certified Specialty: No

### RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
 Phone: (858) 966-7785  
Fax: (858) 966-8658  
 After Hours Phone: (858) 966-7785  
Provider Gender: Female  
NPI: 1942478524  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network







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### INFECTIOUS DISEASE

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#### RAJAGOPAL, AMUTHA

Provider ID: 221088  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST FL 3  
SAN DIEGO, CA 92103






 Phone: (619) 433-3995  
 After Hours Phone: (619) 433-3995  
Provider Gender: Female  
NPI: 1124465745  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### INFECTIOUS DISEASE

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#### RAMIREZ SANCHEZ, CLAUDIA


Provider ID: 299946  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1659720555  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER

 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group


### **INFECTIOUS DISEASE**

#### **TOVAR PADUA, LEIDY**

Provider ID: 265093  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK




 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female  
NPI: 1033491311

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, CHILDRENS HOSP OF  
LOS ANGELES, LONG BEACH  
MEMORIAL MED CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19



American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **INFECTIOUS DISEASE**


#### **TOVAR PADUA, LEIDY**

Provider ID: 205357  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
2  
SAN DIEGO, CA 92123  
 Phone: (858) 966-7785  
Fax: (858) 966-8658

 After Hours Phone: (858)  
966-7785


Provider Gender: Female  
NPI: 1033491311


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, CHILDRENS HOSP OF  
LOS ANGELES, LONG BEACH  
MEMORIAL MED CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A  
IPA: Rady Childrens Health  
Network

### **INTERNAL MEDICINE**



#### **ARUTYUNOV, BORIS**

Provider ID: 201910

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (619) 471-9186  
 After Hours Phone: (619)  
471-9186

Provider Gender: Male  
NPI: 1144562703


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Russian

Cultural Competency: N  
Hospital Affiliation: GOOD  
SAMARITAN HOSPITAL, PIH  
HEALTH GOOD SAMARITAN  
HOSPITAL, SUTTER MEDICAL  
CENTER SACRAMENTO, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>BALL, SHELDON</b> Provider ID: 294137 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 6973 LINDA VISTA RD SAN DIEGO, CA 92111 Phone: (858) 279-0925 Fax: (858) 633-4680 After Hours Phone: (858) 279-0925 Provider Gender: Male NPI: 1689646275 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M 8:30AM-5:30PM TU 8:30AM-8:30PM W-F 8:30AM-5:30PM SA 9AM-4PM Website: N/A IPA: IHP of Southern Cal-PHP	<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>BORDIN-WOSK, TALYA</b> Provider ID: 273983 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (760) 471-9186 Fax: (619) 543-8255 After Hours Phone: (760) 471-9186 Provider Gender: Female NPI: 1801184973 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA Fax: (858) 633-4680 After Hours Phone: (858) 810-8700 Provider Gender: Male NPI: 1689646275 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M 8:30AM-5:30PM TU 8:30AM-8:30PM W-F 8:30AM-5:30PM SA 9AM-4PM Website: N/A IPA: IHP of Southern Cal-PHP	<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>JOLLA JOHN SALLY THORNTON</b> Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>BALL, SHELDON</b> Provider ID: 294136 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 7011 LINDA VISTA RD SAN DIEGO, CA 92111 Phone: (858) 810-8700	<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>BORDIN-WOSK, TALYA</b> Provider ID: 273983 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (760) 471-9186 Fax: (619) 543-8255 After Hours Phone: (760) 471-9186 Provider Gender: Female NPI: 1801184973 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA	<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>CHENG, GEORGE</b> Provider ID: 247639 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1316174568 Provider English Spoken: Y Provider Language(s) Spoken: Chinese Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

**PROVIDER**  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

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### INTERNAL MEDICINE

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#### DJEKIC, KRISTINA

Provider ID: 286668  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1417343732

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

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#### GRUNVALD, EDUARDO

Provider ID: 286344

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1497791339

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

---

#### GRUNVALD, EDUARDO

Provider ID: 286343

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1497791339

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

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#### HASTIE, ELIZABETH

Provider ID: 291431

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1154818797

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE


---


#### HOGARTH, MICHAEL

Provider ID: 214386

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1225019193

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, UC DAVIS


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE


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#### JABBOUR, MOUSSA

Provider ID: 256659

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1255741633

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

---


#### KATZ, YISRAEL

Provider ID: 272936

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1730507872

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### INTERNAL MEDICINE


---


#### KVIATKOVSKY, MILLA

Provider ID: 274003

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (619) 543-6222

 After Hours Phone: (619)  
543-6222

Provider Gender: Female

NPI: 1366855355

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Finnish, French,  
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


**LAGO HERNANDEZ, CARLOS**

Provider ID: 238622

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1558756270

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERNAL MEDICINE


**LAM, MICHAEL**

Provider ID: 274411

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

**LAM, MICHAEL**


Provider ID: 274410

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE  
P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


**LEVERONE, NICHOLAS**

Provider ID: 272692

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1407388564

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **MAJITHIA, AMIT**

Provider ID: 255882

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4168 FRONT ST

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801091459

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **MARTINEZ, ARMANDO**

Provider ID: 291421

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1598261091

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **MUNCE, DANIELLE**

Provider ID: 272577

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1740644509

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **NOKES, BRANDON**

Provider ID: 287582

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **INTERNAL MEDICINE**

#### **SEBASKY, MEGHAN**

Provider ID: 273962

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (619) 543-6222  
Fax: (619) 543-8255

 After Hours Phone: (619)  
543-6222

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **INTERNAL MEDICINE**


#### **SMITH, CHELSEY**

Provider ID: 239920

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (858) 657-6110

 After Hours Phone: (858)  
657-6110

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **INTERNAL MEDICINE**

#### **TANTISIRA, LALITA**

Provider ID: 275927

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Thai

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **INTERNAL MEDICINE**

#### **TANTISIRA, LALITA**

Provider ID: 275926

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1508874298

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Thai

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

---

#### TAYLOR, DAVID

Provider ID: 274469

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033572995

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

---

#### THOMAS, ROBERT

Provider ID: 238929

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1053765909

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

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#### WANG, ANGELA

Provider ID: 259535

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730133976

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### INTERNAL MEDICINE

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#### WANG, ANGELA

Provider ID: 259534

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE  
P2

SAN DIEGO, CA 92121

☎ Phone: (855) 355-5864

Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (855) 355-5864*

*Provider Gender: Female*

*NPI: 1730133976*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **INTERNAL MEDICINE**

#### **WEBSTER, LUKE**

*Provider ID: 272681*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

📍 *200 W ARBOR DR*  
*SAN DIEGO, CA 92103*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1235660887*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **INTERNAL MEDICINE**

#### **YANG, JENNY**

*Provider ID: 283026*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

📍 *4168 FRONT ST*  
*SAN DIEGO, CA 92103*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346636453*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP*

*CORONADO HOSP AND HEALTHCARE CTR, UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **INTERNAL MEDICINE**

#### **YANG, JENNY**

*Provider ID: 283027*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

📍 *4520 EXECUTIVE DR STE*  
*P2*

*SAN DIEGO, CA 92121*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1346636453*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP*

*CORONADO HOSP AND HEALTHCARE CTR, UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*



*Min/Max Age: 18\None*

*American Sign Language (ASL):*  
*N*

♿ *Accessibility: CONTACT PROVIDER*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录



 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

---

### INTERNAL MEDICINE



#### **ZHANG, SHERRY**

Provider ID: 272657  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1588198147

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin


Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


---


### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **BEGOVIC, ADNAN**


Provider ID: 276291  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR STE  
3-313  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1093791014

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL


HOSPITAL, UCSD LA JOLLA  
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **BEGOVIC, ADNAN**


Provider ID: 276290  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 555 WASHINGTON ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1093791014

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA  
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **BEGOVIC, ADNAN**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider ID: 210825  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1093791014  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **BOROK, ZEA**

Provider ID: 284706

Board Certified Specialty: No

UCSD MEDICAL GROUP  
4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-5273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-5273  
Provider Gender: Female  
NPI: 1750317251  
Provider English Spoken: Y  
Provider Language(s) Spoken: Hebrew  
Cultural Competency: N  
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **BOROK, ZEA**

Provider ID: 284705

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-5273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-5273  
Provider Gender: Female  
NPI: 1750317251  
Provider English Spoken: Y  
Provider Language(s) Spoken: Hebrew  
Cultural Competency: N  
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### **BOROK, ZEA**

Provider ID: 284704

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE P2  
SAN DIEGO, CA 92121

Phone: (800) 926-5273  
Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录





 After Hours Phone: (800) 926-5273  
Provider Gender: Female  
NPI: 1750317251  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hebrew  
Cultural Competency: N  
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### CRITICAL CARE MEDICINE

#### **ODISH, MAZEN**

Provider ID: 271467  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male



NPI: 1992141428  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### CRITICAL CARE MEDICINE

#### **ODISH, MAZEN**






Provider ID: 271466  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4520 EXECUTIVE DR STE P2  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1992141428  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### CRITICAL CARE MEDICINE



#### **ODISH, MAZEN**

Provider ID: 271469  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1992141428  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PROVIDER


 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE CRITICAL CARE MEDICINE

#### TRAN, LINH

Provider ID: 271939  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1851682728

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY



THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST

HEALTHCARE RANCHO  
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A



IPA: UCSD Medical Group

### INTERNAL MEDICINE GERIATRIC MEDICINE

#### AGNIHOTRI, PARAG

Provider ID: 247292  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1447351085



 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: MERCY  
GENERAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A


IPA: UCSD Medical Group

### INTERVENTIONAL CARDIOLOGY

#### CRUZ RODRIGUEZ, JOSE



Provider ID: 300061  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1457770240


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL, EL  
CENTRO REGIONAL MEDICAL  
CENTER

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### INTERVENTIONAL CARDIOLOGY

#### KINGDON, TYLER

Provider ID: 301814  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855  
Fax: (858) 966-7903




 After Hours Phone: (858)  
966-5855

Provider Gender: Male  
NPI: 1477084283

 Provider English Spoken: Y




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## D. 专家名录




Cultural Competency: N  
 Hospital Affiliation:  
 CHILDRENS HOSPITAL OF  
 ORANGE COUNTY, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network


### INTERVENTIONAL CARDIOLOGY

**MOHAMEDALI, BURHAN**  
 Provider ID: 245577  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 292 EUCLID AVE STE 210  
 SAN DIEGO, CA 92114  
 Phone: (619) 616-2100  
 Fax: (619) 616-2104  
 After Hours Phone: (619)  
 616-2100  
 Provider Gender: Male  
 NPI: 1831393289  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish, Swahili  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 CHULA VISTA MED CTR,






Adventist Health and Rideout  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

**SHEREV, DIMITRI**  
 Provider ID: 301306  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 6402 EL CAJON BLVD STE  
 100  
 SAN DIEGO, CA 92115  
 Phone: (619) 582-4490  
 Fax: (519) 582-4737  
 After Hours Phone: (619)  
 582-4490  
 Provider Gender: Male  
 NPI: 1154323996  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Bulgarian, Russian,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL,  
 GROSSMONT HOSPITAL,  
 ALVARADO COMMUNITY  
 HOSPITAL, SHARP MEMORIAL  
 HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,  
 ALVARADO HOSPITAL LLC,  
 SHARP CHULA VISTA MED  
 CTR, SHARP CHULA VISTA  
 MED CTR, TRI CITY MEDICAL  
 CTR, SCRIPPS MERCY  
 HOSPITAL CHULA VISTA,  
 Sharp Grossmont Hospital  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY




**SHEREV, DIMITRI**  
 Provider ID: 302987  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 6402 EL CAJON BLVD STE  
 102  
 SAN DIEGO, CA 92115  
 Phone: (619) 582-4490  
 Fax: (619) 582-4737  
 After Hours Phone: (619)  
 582-4490  
 Provider Gender: Male  
 NPI: 1154323996  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Bulgarian, Russian,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,  
GROSSMONT HOSPITAL,  
ALVARADO COMMUNITY  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
ALVARADO HOSPITAL LLC,  
SHARP CHULA VISTA MED  
CTR, SHARP CHULA VISTA  
MED CTR, TRI CITY MEDICAL  
CTR, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N





 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**  
Provider ID: 295844  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 292 EUCLID AVE STE 210  
SAN DIEGO, CA 92114  
 Phone: (619) 616-2100

Fax: (619) 616-2104  
 After Hours Phone: (619)  
616-2100  
Provider Gender: Female  
NPI: 1811307051  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP



### INTERVENTIONAL CARDIOLOGY


**SUDHAKAR, DEEPTHI**  
Provider ID: 296050  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 292 EUCLID AVE STE 210  
SAN DIEGO, CA 92114  
 Phone: (619) 616-2100  
Fax: (619) 616-2104  
 After Hours Phone: (619)  
616-2100  
Provider Gender: Female  
NPI: 1811307051  
 Provider English Spoken: Y  
Cultural Competency: N



Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 15\99  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### LICENSED PROFESSIONAL CLINICAL COUNSELOR

**GARCIA, JENNI**  
Provider ID: 299310  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3025 BEYER BLVD  
SAN DIEGO, CA 92154  
 Phone: (619) 662-4100  
Fax: (619) 662-4119

 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1437775863

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT

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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **LICENSED PROFESSIONAL CLINICAL COUNSELOR**

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#### **NAKAMURA, TIFFANY**

Provider ID: 239584  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4510 EXECUTIVE DR STE  
315  
SAN DIEGO, CA 92121  
📞 Phone: (858) 534-8019  
🕒 After Hours Phone: (858)  
534-8019

Provider Gender: Female  
NPI: 1356846349

🗳️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **MATERNAL AND FETAL MEDICINE**

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#### **ADAMI, REBECCA**

Provider ID: 277179  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH

**NETWORK**  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
📞 Phone: (858) 966-6710  
Fax: (858) 966-6711

🕒 After Hours Phone: (858)  
966-6710

Provider Gender: Female  
NPI: 1992149447

🗳️ Provider English Spoken: Y  
🗳️ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **MATERNAL AND FETAL MEDICINE**

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#### **ADAMI, REBECCA**

Provider ID: 272670  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

📞 Phone: (858) 966-6710  
Fax: (858) 966-6711

🕒 After Hours Phone: (858)  
966-6710

Provider Gender: Female  
NPI: 1992149447

🗳️ Provider English Spoken: Y  
🗳️ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

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### **MATERNAL AND FETAL MEDICINE**

---

#### **EMERUWA, UKACHI**

Provider ID: 300012  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4168 FRONT ST  
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

Provider Gender: Female

NPI: 1245627421

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### MATERNAL AND FETAL MEDICINE


#### **EMERUWA, UKACHI**

Provider ID: 300010

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1245627421


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### MATERNAL AND FETAL MEDICINE

#### **EMERUWA, UKACHI**

Provider ID: 300011

Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1245627421

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### MATERNAL AND FETAL MEDICINE

#### **LAURENT, LOUISE**


Provider ID: 208640

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770532707

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### MATERNAL AND FETAL MEDICINE

#### **MCCULLOUGH, DEIRDRE**


Provider ID: 277260

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711





 After Hours Phone: (858)  
966-6710





Provider Gender: Female





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## D. 专家名录

NPI: 1639153018

 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MARY BIRCH HOSP FOR  
 WOMEN AND NEWBORNS,  
 Sharp Grossmont Hospital,  
 SHARP MEMORIAL HOSPITAL,  
 RADY CHILDRENS HOSPITAL  
 SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network

 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SHARP  
 MARY BIRCH HOSP FOR  
 WOMEN AND NEWBORNS,  
 Sharp Grossmont Hospital,  
 SHARP MEMORIAL HOSPITAL,  
 RADY CHILDRENS HOSPITAL  
 SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network

 Provider Language(s)  
 Spoken: Hungarian,  
 Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON, UCSD MEDICAL  
 CTR, RADY CHILDRENS  
 HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network, UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

#### **MCCULLOUGH, DEIRDRE**

Provider ID: 210034  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 3003 HEALTH CENTER DR  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-6710  
 Fax: (858) 939-4102  
 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1639153018






### MATERNAL AND FETAL MEDICINE

#### **MELBER, DORA**

Provider ID: 296994  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 3003 HEALTH CENTER DR  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-6710  
 Fax: (858) 939-4102  
 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y

### MATERNAL AND FETAL MEDICINE




#### **MELBER, DORA**




Provider ID: 296998  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 7910 FROST ST STE 220  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-6710  
 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hungarian,




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network, UCSD Medical Group

Cultural Competency: N  
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network, UCSD Medical Group

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network, UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
 Provider ID: 296990  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711  
 After Hours Phone: (858) 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hungarian, Spanish

### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
 Provider ID: 296989  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 7910 FROST ST STE 430  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711  
 After Hours Phone: (858) 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hungarian, Spanish  
 Cultural Competency: N

### MATERNAL AND FETAL MEDICINE

**MOORE, THOMAS**  
 Provider ID: 208643  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 4168 FRONT ST  
 SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
 Provider Gender: Male  
 NPI: 1184682379  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None


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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### MATERNAL AND FETAL MEDICINE

#### **MOORE, THOMAS**


Provider ID: 208644

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4910 DIRECTORS PL STE  
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1184682379

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### MATERNAL AND FETAL MEDICINE

#### **REIMERS, REBECCA**


Provider ID: 294648

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 220  
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### MATERNAL AND FETAL MEDICINE


#### **REIMERS, REBECCA**

Provider ID: 294647

Board Certified Specialty: Yes

### MATERNAL AND FETAL MEDICINE

 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 939-4102

 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### MATERNAL AND FETAL MEDICINE

#### **RICHARDSON, ALVIE**

Provider ID: 214436

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 939-4102

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1154305977*

🗣 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### MATERNAL AND FETAL MEDICINE

#### **RICHARDSON, ALVIE**

*Provider ID: 277314*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-6710*

*Fax: (858) 966-6711*

☎ *After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1154305977*

🗣 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### MATERNAL AND FETAL MEDICINE

#### **SCHWENDEMANN, WADE**

*Provider ID: 277304*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-6710*

*Fax: (858) 966-6711*

☎ *After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1477563302*

🗣 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp*

*Grossmont Hospital, Sharp*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### MATERNAL AND FETAL MEDICINE

#### **SCHWENDEMANN, WADE**

*Provider ID: 277307*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3003 HEALTH CENTER DR SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-6710*

*Fax: (858) 939-4102*





☎ *After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1477563302*




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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### MATERNAL AND FETAL MEDICINE





#### **SHANNON, KELLI**




*Provider ID: 208474*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*  
 *After Hours Phone: (858)*

966-6710  
*Provider Gender: Female*  
*NPI: 1922156397*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### MATERNAL AND FETAL MEDICINE



#### **WESTERMANN, MELISSA**

*Provider ID: 242522*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-6710*  
*Fax: (858) 939-4102*  
 *After Hours Phone: (858) 966-6710*  
*Provider Gender: Female*  
*NPI: 1760730758*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### MATERNAL AND FETAL MEDICINE

#### **WESTERMANN, MELISSA**

*Provider ID: 277353*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-6710*  
*Fax: (858) 966-6711*  
 *After Hours Phone: (858) 966-6710*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female  
NPI: 1760730758

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
EARL AND LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, SHARP  
MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

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### **MATERNAL AND FETAL MEDICINE**

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#### **WESTERMANN, MELISSA**

Provider ID: 287084

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 7910 FROST ST STE 220  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6710  
Fax: (858) 966-6711

🕒 After Hours Phone: (858)  
966-6710

Provider Gender: Female  
NPI: 1760730758

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
EARL AND LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, SHARP  
MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

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### **MATERNAL AND FETAL MEDICINE**

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#### **WILLIAMS, KRISTIN**

Provider ID: 277383

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6710  
Fax: (858) 966-6711

🕒 After Hours Phone: (858)  
966-6710

Provider Gender: Female  
NPI: 1992847131

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
SAN MATEO MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, TRI CITY  
MEDICAL CTR, CALIFORNIA  
PACIFIC MED CTR,  
CALIFORNIA PACIFIC MED  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

### MATERNAL AND FETAL MEDICINE

#### **WILLIAMS, KRISTIN**

Provider ID: 277387

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

🕒 After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1992847131

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
SAN MATEO MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, TRI CITY  
MEDICAL CTR, CALIFORNIA  
PACIFIC MED CTR,  
CALIFORNIA PACIFIC MED  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### MATERNAL AND FETAL MEDICINE

#### **WOLF, RICHARD**

Provider ID: 209253

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4910 DIRECTORS PL STE  
200

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1497713846

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, PALOMAR  
MEDICAL CENTER, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

#### **BAI-TONG, SHIYU**

Provider ID: 283285

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

🕒 After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1528454188

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### NEONATAL / PERINATAL MEDICINE

#### **CARROLL, JEANNE**

Provider ID: 205727

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1386928224

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **DEL ROSARIO, PAMELA**

Provider ID: 295000

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123

Phone: (858) 966-5888

After Hours Phone: (858)  
966-5888

Provider Gender: Female

NPI: 1952691941

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **FLEMING, SARAH**

Provider ID: 205645

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

4077 5TH AVE

SAN DIEGO, CA 92103

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)  
260-7046

Provider Gender: Female

NPI: 1679809826

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **GLENN, TARA**

Provider ID: 283159

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)  
966-5818




Provider Gender: Female

NPI: 1992060974





Provider English Spoken: Y




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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network






### NEONATAL / PERINATAL MEDICINE


**HIETALATI, SAMANTHA**  
Provider ID: 294251  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK  
 3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5888  
Fax: (858) 249-5839  
 After Hours Phone: (858)  
966-5888  
Provider Gender: Female  
NPI: 1245617489  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network






### NEONATAL / PERINATAL MEDICINE

**HONOLD, JOSE**  
Provider ID: 242881  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 4077 5TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 691-7000  
 After Hours Phone: (619)  
691-7000  
Provider Gender: Male  
NPI: 1093886855  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PIONEERS MEMORIAL  
HOSPITAL, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MERCY HOSPITAL

CHULA VISTA, EL CENTRO  
REGIONAL MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

**HONOLD, JOSE**  
Provider ID: 205941  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5818  
Fax: (858) 966-7483  
 After Hours Phone: (858)  
966-5818  
Provider Gender: Male  
NPI: 1093886855  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PIONEERS MEMORIAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

HOSPITAL, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, EL CENTRO  
REGIONAL MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network




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### NEONATAL / PERINATAL MEDICINE

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#### **LANE, BRIAN**

Provider ID: 205707  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5818  
Fax: (858) 966-7483  
 After Hours Phone: (858)  
966-5818  
Provider Gender: Male  
NPI: 1427129287

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MEMORIAL  
HOSPITAL, SHARP CHULA  
VISTA MED CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

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### NEONATAL / PERINATAL MEDICINE

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#### **LE, CRYSTAL**

Provider ID: 205630  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5818  
Fax: (858) 966-7483  
 After Hours Phone: (858)  
966-5818  
Provider Gender: Female  
NPI: 1003028416  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

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### NEONATAL / PERINATAL MEDICINE

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**MARC-AURELE, KRISHELLE**  
Provider ID: 206208

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


**RADY CHILDRENS HEALTH NETWORK**

 3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-8022

Fax: (858) 966-8457

 After Hours Phone: (858)  
966-8022

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

**RADY CHILDRENS HEALTH NETWORK**

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (619) 543-3812

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

**MARC-AURELE, KRISHELLE**

Provider ID: 206210

Board Certified Specialty: No

### NEONATAL / PERINATAL MEDICINE

**MARC-AURELE, KRISHELLE**

Provider ID: 206206

Board Certified Specialty: No

### NEONATAL / PERINATAL MEDICINE

**MATOBANA, NANA**

Provider ID: 297974

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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## D. 专家名录

### NETWORK

3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858)  
966-5888

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### MATOBA, NANA

Provider ID: 299894

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 966-7483

After Hours Phone: (858)  
966-5888

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### MATOBA, NANA

Provider ID: 297975

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

4077 5TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)  
260-7046

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### MCCULLEY, DAVID

Provider ID: 277177

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)  
966-5818

Provider Gender: Male

NPI: 1235304155

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE


#### **MESTAN, KAREN**

Provider ID: 285932

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

 After Hours Phone: (858)  
966-5888

Provider Gender: Female

NPI: 1942253356


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health


### NEONATAL / PERINATAL MEDICINE

#### **NIEMI, ANNA-KAISA**

Provider ID: 262157

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123



 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Finnish, French,  
German, Spanish, Swedish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE


#### **NIEMI, ANNA-KAISA**


Provider ID: 262158

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 4077 5TH AVE



SAN DIEGO, CA 92103

 Phone: (619) 260-7107

 After Hours Phone: (619)  
260-7107

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Finnish, French,  
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER

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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE


#### **NYMAN, KATHERINE**

Provider ID: 301822  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 4077 5TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 260-7046  
Fax: (619) 686-3843

 After Hours Phone: (619) 260-7046


Provider Gender: Female  
NPI: 1003260951

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL

### MEDICINE

#### **NYMAN, KATHERINE**


Provider ID: 301819  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123

 Phone: (858) 966-5888  
Fax: (858) 249-5839

 After Hours Phone: (858) 966-5888


Provider Gender: Female  
NPI: 1003260951

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL


### MEDICINE

#### **O'DONNELL, F**

Provider ID: 205578  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

### NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5818  
Fax: (858) 966-7483

 After Hours Phone: (858) 966-5818

Provider Gender: Female  
NPI: 1477625325


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE

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## D. 专家名录

### **RAMOS, CARLOS**

Provider ID: 206060

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (619) 543-3759

Fax: (619) 543-3812

 After Hours Phone: (619)  
543-3759

Provider Gender: Male

NPI: 1205047545

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, EL CENTRO  
REGIONAL MEDICAL CENTER,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO, UCSD LA JOLLA  
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **NEONATAL / PERINATAL MEDICINE**

#### **SAJTI, ENIKO**

Provider ID: 206171

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (619) 543-3759

Fax: (619) 543-3812

 After Hours Phone: (619)  
543-3759

Provider Gender: Female

NPI: 1649433103

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **NEONATAL / PERINATAL MEDICINE**


#### **SAUER, CHARLES**

Provider ID: 303906

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 4077 5TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 260-7046

 After Hours Phone: (619)  
260-7046

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
PALOMAR MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PALOMAR  
HEALTH, SCRIPPS MEMORIAL  
HOSPITAL, SOUTHWEST  
HEALTHCARE RANCHO  
SPRINGS HOSPITAL,


SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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## D. 专家名录

IPA: Rady Childrens Health Network

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### NEONATAL / PERINATAL MEDICINE


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#### **SAUER, CHARLES**

Provider ID: 303904

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)  
966-5888

Provider Gender: Male

NPI: 1538388988


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### NEONATAL / PERINATAL MEDICINE


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#### **SONG, RICHARD**

Provider ID: 206143

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5818

Provider Gender: Male

NPI: 1881893477

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR

MEDICAL CENTER,


SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

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### NEONATAL / PERINATAL MEDICINE


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#### **SPEZIALE, MARK**

Provider ID: 206126

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5888

Provider Gender: Male

NPI: 1801978143

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

CHULA VISTA, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
UCSD MEDICAL CTR, UCSD  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### NEONATAL / PERINATAL MEDICINE


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#### **SUTTNER, DENISE**

Provider ID: 265085

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1457433799

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SOUTHWEST  
HEALTHCARE INLAND

VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

---

### NEONATAL / PERINATAL MEDICINE

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#### **SWEENEY, NATHALY**

Provider ID: 206182

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1164572632

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### NEONATAL / PERINATAL MEDICINE

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#### **VOLLER, STEPHANNIE**

Provider ID: 303808

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3010 CHILDRENS WAY FL 3

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## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5888  
Fax: (858) 249-5839  
🕒 After Hours Phone: (858) 966-5888  
Provider Gender: Female  
NPI: 1417121971  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE

**VOLLER, STEPHANNIE**  
Provider ID: 303806  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5888  
Fax: (858) 966-7483  
🕒 After Hours Phone: (858) 966-5888  
Provider Gender: Female

NPI: 1417121971  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE

**VOLLER, STEPHANNIE**  
Provider ID: 303807  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 8001 FROST ST  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8052  
Fax: (858) 966-7789  
🕒 After Hours Phone: (858) 966-8052  
Provider Gender: Female  
NPI: 1417121971  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN



DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### NEONATAL / PERINATAL MEDICINE

**WEISS, KATHERINE**  
Provider ID: 264677  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5818  
Fax: (858) 966-7483  
🕒 After Hours Phone: (858) 966-5818  
Provider Gender: Female  
NPI: 1053541862  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N








了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*









### NEONATAL / PERINATAL MEDICINE

#### **WEST, JULIE**

*Provider ID: 297073*  
*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**  
 3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-5888*  
*Fax: (858) 249-5839*  
 *After Hours Phone: (858) 966-5888*  
*Provider Gender: Female*  
*NPI: 1811151848*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### NEPHROLOGY

#### **QUEVEDO, JUAN**







*Provider ID: 269998*  
*Board Certified Specialty: No*  
**COMMUNITY CARE IPA LLC**  
 995 GATEWAY CENTER  
WAY STE 207  
SAN DIEGO, CA 92102  
 *Phone: (619) 263-9729*  
*Fax: (619) 263-9730*  
 *After Hours Phone: (619) 263-9729*  
*Provider Gender: Male*  
*NPI: 1093902496*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RIVERSIDE COMMUNITY HOSP*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

### NEPHROLOGY

#### **SHAH, MITA**

*Provider ID: 262230*  
*Board Certified Specialty: No*

### IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

 8010 FROST ST STE 510  
SAN DIEGO, CA 92123  
 *Phone: (858) 637-4700*  
*Fax: (858) 637-4701*  
 *After Hours Phone: (858) 637-4700*  
*Provider Gender: Female*  
*NPI: 1194773010*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Imperial Health Holdings Medical Group-SD*

### NEPHROLOGY

#### **THOMAS, THEODORE**

*Provider ID: 262359*  
*Board Certified Specialty: No*  
**IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD**  
 4060 4TH AVE STE 220  
SAN DIEGO, CA 92103  
 *Phone: (619) 299-2350*  
*Fax: (619) 297-8379*  
 *After Hours Phone: (619) 299-2350*  
*Provider Gender: Male*

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## D. 专家名录

NPI: 1669477113

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KINDRED

HOSPITAL SAN DIEGO,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SCRIPPS MERCY


HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

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### **NEPHROLOGY**

#### **ZHONG, YAN**


Provider ID: 296053

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)  
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los

Angeles General Medical

Center, SELECT SPECIALTY

HOSPITAL SAN DIEGO,

SELECT SPECIALTY HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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### **NEPHROLOGY**

#### **ZHONG, YAN**


Provider ID: 296054

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)  
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los

Angeles General Medical

Center, SELECT SPECIALTY

HOSPITAL SAN DIEGO,


SELECT SPECIALTY HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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### **NEUROLOGY**

#### **BEVINS, ELIZABETH**


Provider ID: 241943

Board Certified Specialty: No


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## D. 专家名录

### UCSD MEDICAL GROUP

 4510 EXECUTIVE DR STE  
325  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1013395151

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### NEUROLOGY

#### BUI, JONATHAN

Provider ID: 206005

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8001 FROST ST  
SAN DIEGO, CA 92123

 Phone: (858) 966-5999  
Fax: (858) 966-4930

 After Hours Phone: (858)  
966-5999

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEUROLOGY


#### BUI, JONATHAN

Provider ID: 303227

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123  
 Phone: (858) 966-5819  
Fax: (858) 966-4930

 After Hours Phone: (858)  
966-5819

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEUROLOGY

#### COUGHLIN, DAVID

Provider ID: 304172

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1740543784

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### COUGHLIN, DAVID

Provider ID: 240949

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

### COUGHLIN, DAVID

Provider ID: 240951

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1740543784

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

### DOVE, KATHERINE

Provider ID: 302784

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1033642574

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### NEUROLOGY

### DUNN-PIRIO, ANASTASIE

Provider ID: 304160

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD  
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1700177136

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

### DUNN-PIRIO, ANASTASIE

Provider ID: 203235

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR FL 1

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## D. 专家名录

SAN DIEGO, CA 92103  
☎ Phone: (619) 543-3500  
Fax: (888) 539-8781  
🕒 After Hours Phone: (619) 543-3500  
Provider Gender: Female  
NPI: 1700177136  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

#### FREDERICK, ALIYA

Provider ID: 283152  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5999  
Fax: (858) 576-8412  
🕒 After Hours Phone: (858) 966-5999  
Provider Gender: Female  
NPI: 1548657992  
🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEUROLOGY

#### GOLD, JEFFREY

Provider ID: 283335  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5999  
Fax: (858) 576-8412  
🕒 After Hours Phone: (858) 966-5999  
Provider Gender: Male  
NPI: 1568773984  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEUROLOGY

#### GOLD, JEFFREY

Provider ID: 303287  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3030 CHILDRENS WAY FL  
4  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5819  
Fax: (858) 966-4930  
🕒 After Hours Phone: (858) 966-5819  
Provider Gender: Male  
NPI: 1568773984  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND, SHARP MEMORIAL  
HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

---

### NEUROLOGY


#### GUIDO-ESTRADA, NATALIE

Provider ID: 303271


Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123


 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

---


### NEUROLOGY


#### GUNDOGDU, MELEK

Provider ID: 201623

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103


 Phone: (619) 543-3500

 After Hours Phone: (619) 543-3500

Provider Gender: Female

NPI: 1437253671

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### NEUROLOGY

#### HANNAWI, ANDREW

Provider ID: 283154

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858) 966-5999

Provider Gender: Male

NPI: 1194179135

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

---

### NEUROLOGY







#### IRAGUIMADOZ, VICENTE

Provider ID: 304154






Board Certified Specialty: No  
UCSD MEDICAL GROUP




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## D. 专家名录

 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1053326710  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

**KHAMISHON, BORIS**  
Provider ID: 269923  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 6699 ALVARADO RD STE  
2301  
SAN DIEGO, CA 92120  
 Phone: (619) 582-2595  
 After Hours Phone: (619)  
582-2595  
Provider Gender: Male  
NPI: 1104922038  
 Provider English Spoken: Y  
 Provider Language(s)



Spoken: Russian  
Cultural Competency: N  
Hospital Affiliation: ALVARADO  
HOSPITAL LLC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-4PM  
F 8AM-3PM  
 Website: N/A  
IPA: Community Care IPA LLC

### NEUROLOGY

**KIM MCMANUS, OLIVIA**  
Provider ID: 303229  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3030 CHILDRENS WAY FL  
4  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5819  
Fax: (858) 966-4930  
 After Hours Phone: (858)  
966-5819  
Provider Gender: Female  
NPI: 1174870067  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, CHILDRENS  
HOSPITAL OF ORANGE  
COUNTY, RADY CHILDRENS

HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network




### NEUROLOGY

**LAVERTY, CHAMINDRA**  
Provider ID: 303258  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3030 CHILDRENS WAY FL  
4  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5819  
Fax: (858) 966-4930  
 After Hours Phone: (858)  
966-5819  
Provider Gender: Female  
NPI: 1538320395  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录








 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

---

### **NEUROLOGY**

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#### **LEE, DAVID**



*Provider ID: 304198*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1871884130*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Korean*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **NEUROLOGY**

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#### **LEE, DAVID**


*Provider ID: 246263*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1871884130*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Korean*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



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### **NEUROLOGY**

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#### **LEGER, GABRIEL**

*Provider ID: 304176*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120





 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1720367899*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: French*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **NEUROLOGY**

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#### **LEGER, GABRIEL**

*Provider ID: 247608*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4510 EXECUTIVE DR STE 325  
SAN DIEGO, CA 92121  
 *Phone: (858) 543-8540*  
 *After Hours Phone: (858) 543-8540*  
*Provider Gender: Male*  
*NPI: 1720367899*  
 *Provider English Spoken: Y*





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## D. 专家名录

 *Provider Language(s)*  
*Spoken: French*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*







*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **NEUROLOGY**








**LONGARDNER, KATHERINE**  
*Provider ID: 268346*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1801215926*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


### **NEUROLOGY**

**LONGARDNER, KATHERINE**  
*Provider ID: 304197*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Female*  
*NPI: 1801215926*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **NEUROLOGY**

**QAYOUMI, WALI**  
*Provider ID: 304161*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Male*  
*NPI: 1093178220*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: French*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **NEUROLOGY**

**QAYOUMI, WALI**  
*Provider ID: 284370*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4510 EXECUTIVE DR STE  
325

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## D. 专家名录

SAN DIEGO, CA 92121  
☎ Phone: (619) 294-3746  
Fax: (888) 539-8781  
🕒 After Hours Phone: (619) 294-3746  
Provider Gender: Male  
NPI: 1093178220  
📄 Provider English Spoken: Y  
📄 Provider Language(s) Spoken: French  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

**RIGGINS, NINA**  
Provider ID: 285968  
Board Certified Specialty: No UCSD MEDICAL GROUP  
📄 4510 EXECUTIVE DR STE 325  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1568655264  
📄 Provider English Spoken: Y  
📄 Provider Language(s) Spoken: Russian  
Cultural Competency: N  
Hospital Affiliation: MEDICAL CTR AT UCSF  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

**RIGGINS, NINA**  
Provider ID: 304200  
Board Certified Specialty: No UCSD MEDICAL GROUP  
📄 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1568655264  
📄 Provider English Spoken: Y  
📄 Provider Language(s) Spoken: Russian  
Cultural Competency: N  
Hospital Affiliation: MEDICAL CTR AT UCSF

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY

**SCHORR, EMILY**  
Provider ID: 305023  
Board Certified Specialty: No UCSD MEDICAL GROUP  
📄 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273


Provider Gender: Female  
NPI: 1255862041  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### NEUROLOGY


**SCHORR, EMILY**  
Provider ID: 305021  
Board Certified Specialty: No UCSD MEDICAL GROUP

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## D. 专家名录

 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1255862041

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: UCSD Medical Group

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### NEUROLOGY


---

#### SCHORR, EMILY

Provider ID: 305020  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1255862041

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

#### PROVIDER

 Website: N/A  
IPA: UCSD Medical Group

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### NEUROLOGY

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#### SWEAT, MARIE


Provider ID: 303831  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123  
 Phone: (858) 966-5819  
Fax: (858) 966-4930


 After Hours Phone: (858)  
966-5819


Provider Gender: Female  
NPI: 1861929036

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: Rady Childrens Health  
Network

---

### NEUROLOGY


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#### YANG, JENNIFER

Provider ID: 301593



Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5999  
Fax: (858) 576-8412


 After Hours Phone: (858)  
966-5999


Provider Gender: Female  
NPI: 1528420619


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: Rady Childrens Health  
Network

---

### NEUROLOGY

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#### ZIMBRIC, MICHAEL

Provider ID: 206272  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5999  
Fax: (858) 966-4930  
🕒 After Hours Phone: (858) 966-5999  
Provider Gender: Male  
NPI: 1487819546  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: French  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### NEUROLOGY

**ZIMBRIC, MICHAEL**  
Provider ID: 303284  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3030 CHILDRENS WAY FL 4  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5819

Fax: (858) 966-4930  
🕒 After Hours Phone: (858) 966-5819  
Provider Gender: Male  
NPI: 1487819546  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: French  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### NEUROLOGY CHILD

**GRAVES, JENNIFER**  
Provider ID: 261037  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8800  
🕒 After Hours Phone: (858) 966-8800  
Provider Gender: Female

NPI: 1992849863  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, MEDICAL CTR AT UCSF, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### NEUROLOGY CHILD

**GUIDO-ESTRADA, NATALIE**  
Provider ID: 205825  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 8001 FROST ST  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5999  
Fax: (858) 966-4930  
🕒 After Hours Phone: (858) 966-5999  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1528353521

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEUROLOGY CHILD

#### SAHAGIAN, MICHELLE

Provider ID: 206074

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)  
966-5999

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NUCLEAR MEDICINE

#### SHARIF TABRIZI, AHMAD

Provider ID: 300028

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1053727313

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Providence  
St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### NUCLEAR MEDICINE

#### SHARIF TABRIZI, AHMAD

Provider ID: 300027

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1053727313

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Providence  
St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### OBSTETRICS / GYNECOLOGY

#### ASLIAN, AZITA

Provider ID: 308270

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 205-1952

 After Hours Phone: (619)  
662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female  
NPI: 1851667661

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **OBSTETRICS / GYNECOLOGY**

#### **BLAKE, GARY**


Provider ID: 290731

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Male

NPI: 1497738439

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **OBSTETRICS / GYNECOLOGY**

#### **COHEN, MANSOUR**

Provider ID: 205940


Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

 7695 CARDINAL CT STE  
390

SAN DIEGO, CA 92123

 Phone: (858) 279-8111

Fax: (858) 279-4703

 After Hours Phone: (858)  
279-8111

Provider Gender: Male

NPI: 1346225356

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Farsi,  
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-4PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### **OBSTETRICS / GYNECOLOGY**

#### **DEL CORE, LAURA**

Provider ID: 291329

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **DEL CORE, LAURA**




Provider ID: 291330

Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1790128759

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **DELCORE, LAURA**

Provider ID: 291326  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3750 CONVOY ST STE 312  
SAN DIEGO, CA 92111  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1790128759

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **DELCORE, LAURA**

Provider ID: 291327  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1790128759

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **DELCORE, LAURA**

Provider ID: 291328  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6030 VILLAGE WAY  
SAN DIEGO, CA 92130  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1790128759

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **DRIEBE, AMY**

Provider ID: 291338  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6030 VILLAGE WAY  
SAN DIEGO, CA 92130  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female  
NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OBSTETRICS / GYNECOLOGY**

#### **DRIEBE, AMY**

Provider ID: 291339

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OBSTETRICS / GYNECOLOGY**

#### **DRIEBE, AMY**

Provider ID: 291340

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OBSTETRICS / GYNECOLOGY**


#### **DRIEBE, AMY**

Provider ID: 291337

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3750 CONVOY ST STE 312

SAN DIEGO, CA 92111


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OBSTETRICS / GYNECOLOGY**


#### **FRUGONI, GINA**

Provider ID: 270056

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (619) 400-5074

 After Hours Phone: (619)  
400-5074

Provider Gender: Female

NPI: 1578729315




 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC


### **OBSTETRICS / GYNECOLOGY**

#### **GROGAN, BRIAN**

Provider ID: 296002  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4682  
 After Hours Phone: (858) 279-0925

Provider Gender: Male  
NPI: 1235218439




 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):


N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP



### **OBSTETRICS / GYNECOLOGY**

#### **GROGAN, BRIAN**

Provider ID: 296001  
Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680  
 After Hours Phone: (858) 810-8700  
Provider Gender: Male  
NPI: 1235218439

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):



N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




### **OBSTETRICS / GYNECOLOGY**

#### **GUPTA, PRATIMA**

Provider ID: 257547  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1891749842

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi, Spanish  
Cultural Competency: N



Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **GUPTA, PRATIMA**

Provider ID: 257548  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1891749842

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**

Provider ID: 278915

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

**HARVEY, SCOTT**

Provider ID: 278917

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

**HOANG, MAI**

Provider ID: 208294

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1104143593

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**


**HOM-TEDLA, MARIANNE**

Provider ID: 242751

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1972047397

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**


#### **KLEIN, DAVID**

Provider ID: 271560

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**


#### **KLEIN, DAVID**

Provider ID: 271561

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6030 VILLAGE WAY  
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

#### **KOHATSU, KAREN**

Provider ID: 205481

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 11939 RANCHO  
BERNARDO RD STE 110  
SAN DIEGO, CA 92128

 Phone: (858) 618-1156

Fax: (858) 618-3314

 After Hours Phone: (858)  
618-1156

Provider Gender: Female

NPI: 1679517239

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR  
HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH  
8:30AM-4:30PM

F 8:30AM-2PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### **OBSTETRICS / GYNECOLOGY**

#### **LAMALE-SMITH, LEAH**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider ID: 208681  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

4910 DIRECTORS PL STE  
200  
SAN DIEGO, CA 92121

Phone: (800) 926-8273  
After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1396904876

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **LAMALE-SMITH, LEAH**

Provider ID: 285519  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1396904876

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

Provider ID: 200965  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273  
After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1770702177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

Provider ID: 303064  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

6030 VILLAGE WAY  
SAN DIEGO, CA 92130

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1770702177




Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 16\None N  
American Sign Language (ASL):  Accessibility: CONTACT PROVIDER  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**








#### **MANI, PARVIN**

Provider ID: 242345  
Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD  
 5555 RESERVOIR DR STE  
208  
SAN DIEGO, CA 92120  
 Phone: (619) 583-7555  
Fax: (619) 583-0555  
 After Hours Phone: (619)  
583-7555  
Provider Gender: Female  
NPI: 1518925015  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 10\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Imperial Health Holdings  
Medical Group-SD








### **OBSTETRICS / GYNECOLOGY**

#### **MEADOWS, AUDRA**

Provider ID: 285741  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1467585521  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



### **OBSTETRICS / GYNECOLOGY**

#### **MEADOWS, AUDRA**

Provider ID: 285742  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1467585521  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MELENDEZ, ARIANA**

Provider ID: 299922  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1295232973

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MELENDEZ, ARIANA**

Provider ID: 299921

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4168 FRONT ST

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1295232973

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299981

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1447530696

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299982

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1447530696

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299978

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 3750 CONVOY ST STE 312

SAN DIEGO, CA 92111

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1447530696

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299979

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1447530696

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### **OBSTETRICS / GYNECOLOGY**

#### **PICKETT, CHARLOTTE**

Provider ID: 299980

Board Certified Specialty: No  
UCSD MEDICAL GROUP

6030 VILLAGE WAY

SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1447530696

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### **OBSTETRICS / GYNECOLOGY**

#### **RIVAS, RENEE**

Provider ID: 284298

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295263861

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **OBSTETRICS / GYNECOLOGY**

#### **SHUCKETT, ARIEL**

Provider ID: 290708

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1245590124

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **OBSTETRICS / GYNECOLOGY**

#### **SUYAMA, JULIE**

Provider ID: 284291




Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录







### UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1306372800  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### SUYAMA, JULIE




Provider ID: 284290  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4520 EXECUTIVE DR STE  
360  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1306372800  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**



#### THOMSON, SAMANTHA

Provider ID: 285174  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1689013468  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: CEDARS  
SINAI MEDICAL CENTER,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### THOMSON, SAMANTHA

Provider ID: 285176  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1689013468  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CEDARS  
SINAI MEDICAL CENTER,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

#### **TRUJILLO, JENNIFER**

Provider ID: 290128

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **OCCUPATIONAL MEDICINE**


#### **CROSS, JOHN**

Provider ID: 255322

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (619) 471-9210

 After Hours Phone: (619)  
471-9210

Provider Gender: Male

NPI: 1205989985


 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OCCUPATIONAL MEDICINE**


#### **ISAKARI, MARCIA**

Provider ID: 255368

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103


 Phone: (619) 471-1600

 After Hours Phone: (619)  
471-1600

Provider Gender: Female

NPI: 1861580771

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Portuguese

Cultural Competency: N


Hospital Affiliation: ADVENTIST  
HEALTH LODI MEMORIAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OCCUPATIONAL MEDICINE**


#### **KIM, JOHN**

Provider ID: 255385

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (619) 471-9210

 After Hours Phone: (619)  
471-9210

Provider Gender: Male

NPI: 1114102639

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录



 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

---

### **OCCUPATIONAL THERAPIST**


#### **BOND, KIMBERLEE**

Provider ID: 206549  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1669770939

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **OCCUPATIONAL THERAPIST**


#### **BOND, KIMBERLEE**

Provider ID: 206548

Board Certified Specialty: No


#### UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER  
LN STE 200  
SAN DIEGO, CA 92122

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1669770939


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **OCCUPATIONAL THERAPIST**

#### **LARSEN, JULIE**

Provider ID: 258359

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER  
LN STE 200  
SAN DIEGO, CA 92122

 Phone: (855) 543-0333  
Fax: (858) 657-1809

 After Hours Phone: (855)

543-0333

Provider Gender: Female  
NPI: 1497009179


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **OCCUPATIONAL THERAPIST**

#### **MIKUT, ALYSSA**

Provider ID: 258415

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER  
LN STE 200  
SAN DIEGO, CA 92122

 Phone: (858) 249-0832  
Fax: (858) 657-1809

 After Hours Phone: (858)  
249-0832

Provider Gender: Female  
NPI: 1952816134

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录




American Sign Language (ASL): American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### OPHTHALMOLOGY








#### **BANSAL, PREETI**

Provider ID: 205620  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK  
 7910 FROST ST STE 200  
SAN DIEGO, CA 92123  
 Phone: (858) 309-7702  
Fax: (858) 966-7403  
 After Hours Phone: (858) 309-7702  
Provider Gender: Female  
NPI: 1871664631  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network








### OPHTHALMOLOGY

#### **BAXTER, SALLY**

Provider ID: 272788  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1912325184  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### OPHTHALMOLOGY

#### **BAXTER, SALLY**

Provider ID: 272789  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR STE 101  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1912325184  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### OPHTHALMOLOGY

#### **BEAZER, ALEX**

Provider ID: 272803  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103

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## D. 专家名录

 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1942662168  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **BHATIA, SHAGUN**




Provider ID: 240636  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 7910 FROST ST STE 200 SAN DIEGO, CA 92123  
 Phone: (858) 309-7702  
Fax: (858) 966-7403  
 After Hours Phone: (858) 309-7702  
Provider Gender: Female  
NPI: 1104237353  
 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### **OPHTHALMOLOGY**






#### **CAMP, ANDREW**

Provider ID: 260020  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 7910 FROST ST STE 200 SAN DIEGO, CA 92123  
 Phone: (858) 309-7702  
Fax: (858) 966-7403  
 After Hours Phone: (858) 309-7702  
Provider Gender: Male  
NPI: 1326300377  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

THORNTON, RADY  
CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### **OPHTHALMOLOGY**

#### **GUALTIERI, CHRISTOPHER**

Provider ID: 252313  
Board Certified Specialty: Yes  
COMMUNITY CARE IPA LLC  
 3969 4TH AVE STE 300 SAN DIEGO, CA 92103  
 Phone: (619) 688-2648  
Fax: (619) 688-2626  
 After Hours Phone: (619) 688-2648  
Provider Gender: Male  
NPI: 1790769156  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 6\None


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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### **OPHTHALMOLOGY**

**HENNEIN, LAUREN**


Provider ID: 297009

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **OPHTHALMOLOGY**

**HENNEIN, LAUREN**


Provider ID: 297011

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

### **OPHTHALMOLOGY**


**HUYNH, PAUL**

Provider ID: 245200

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 4844 UNIVERSITY AVE STE  
A

SAN DIEGO, CA 92105

 Phone: (619) 283-1303


Fax: (619) 283-1666

 After Hours Phone: (619)  
283-1303

Provider Gender: Male

NPI: 1871577056

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Tagalog,  
Vietnamese

Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

**HUYNH, PAUL**

Provider ID: 295645

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4844 UNIVERSITY AVE STE  
A

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## D. 专家名录

SAN DIEGO, CA 92105  
☎ Phone: (619) 283-1303  
Fax: (619) 283-1666  
🕒 After Hours Phone: (619) 283-1303  
Provider Gender: Male  
NPI: 1871577056  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM SA 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### OPHTHALMOLOGY

**JACOBSEN, BRADLEY**  
Provider ID: 302869  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 7695 CARDINAL CT STE 100  
SAN DIEGO, CA 92123  
☎ Phone: (858) 609-7100  
Fax: (858) 609-7113

🕒 After Hours Phone: (858) 609-7100  
Provider Gender: Male  
NPI: 1760845184  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### OPHTHALMOLOGY

**KHATIB, NORA**  
Provider ID: 305375  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4060 4TH AVE STE 640  
SAN DIEGO, CA 92103  
☎ Phone: (619) 642-2240  
Fax: (619) 642-2245  
🕒 After Hours Phone: (619) 642-2240  
Provider Gender: Female  
NPI: 1538487756  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: Arabic, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### OPHTHALMOLOGY

**KLINE, LANNING**  
Provider ID: 239915  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1841227477  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


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## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### OPHTHALMOLOGY

#### **LI, ALEXANDRIA**

Provider ID: 272833

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1841652864

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SCRIPPS GREEN

HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### OPHTHALMOLOGY


#### **LIU, YUNXIANG**

Provider ID: 210803

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

 After Hours Phone: (858)  
309-7702

Provider Gender: Female

NPI: 1770849804

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### OPHTHALMOLOGY

#### **MOLL, ANGELA**

Provider ID: 205510

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL

HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### OPHTHALMOLOGY

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## D. 专家名录

### **MOVAGHAR, MANSOOR**

Provider ID: 216412

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

After Hours Phone: (858)  
309-7702

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **OPHTHALMOLOGY**

### **O'HALLORAN, HENRY**

Provider ID: 205888

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)  
309-7702

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **OPHTHALMOLOGY**

### **PHAN, RYAN**

Provider ID: 302925

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

4844 UNIVERSITY AVE STE  
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)  
283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, UCSD  
LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, GROSSMONT HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

### **PHAN, RYAN**

Provider ID: 295647

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4844 UNIVERSITY AVE STE  
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)  
283-1303




Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

 *Provider Language(s)*  
*Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*MEMORIAL HOSPITAL, UCSD*  
*LA JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR, GROSSMONT HOSPITAL,*  
*SCRIPPS MEMORIAL*  
*HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*

### **OPHTHALMOLOGY**


#### **PHAN, RYAN**




*Provider ID: 287883*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 10737 CAMINO RUIZ  
 SAN DIEGO, CA 92126  
 *Phone: (858) 549-3200*  
*Fax: (858) 549-3207*  
 *After Hours Phone: (858)*  
*549-3200*  
*Provider Gender: Male*  
*NPI: 1588027213*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Vietnamese*

*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*MEMORIAL HOSPITAL, UCSD*  
*LA JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR, GROSSMONT HOSPITAL,*  
*SCRIPPS MEMORIAL*  
*HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*

### **OPHTHALMOLOGY**






#### **PHAN, RYAN**

*Provider ID: 295646*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 10737 CAMINO RUIZ  
 SAN DIEGO, CA 92126  
 *Phone: (858) 549-3200*  
*Fax: (858) 549-3207*  
 *After Hours Phone: (858)*  
*549-3200*  
*Provider Gender: Male*  
*NPI: 1588027213*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*

*MEMORIAL HOSPITAL, UCSD*  
*LA JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR, GROSSMONT HOSPITAL,*  
*SCRIPPS MEMORIAL*  
*HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*

### **OPHTHALMOLOGY**

#### **PHAN, RYAN**

*Provider ID: 305445*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 10737 CAMINO RUIZ STE  
 100  
 SAN DIEGO, CA 92126  
 *Phone: (858) 549-3200*  
*Fax: (858) 752-4383*  
 *After Hours Phone: (858)*  
*549-3200*  
*Provider Gender: Male*  
*NPI: 1588027213*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*MEMORIAL HOSPITAL, UCSD*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, GROSSMONT HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### OPHTHALMOLOGY

#### **PUIG LLANO, MANUEL**

Provider ID: 299964

Board Certified Specialty: No  
UCSD MEDICAL GROUP



 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1427102979

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, German,  
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### OPHTHALMOLOGY

#### **RAHMATNEJAD, KAMRAN**

Provider ID: 300040

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699268292


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: UCSD Medical Group


### OPHTHALMOLOGY

#### **SATTERFIELD, KELLIE**

Provider ID: 305302

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5330 CARROLL CANYON  
RD STE 210  
SAN DIEGO, CA 92121

 Phone: (800) 765-2737  
Fax: (619) 291-6577

 After Hours Phone: (800)  
765-2737

Provider Gender: Female

NPI: 1629509336

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### OPHTHALMOLOGY

#### **SHEILS, CATHERINE**

Provider ID: 305305

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5330 CARROLL CANYON  
RD STE 210  
SAN DIEGO, CA 92121

 Phone: (858) 450-1010  
Fax: (858) 450-9451

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

☎ After Hours Phone: (858) 450-1010

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TU 8:30AM-4PM  
W-F 8:30AM-1PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 305306

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 3939 3RD AVE  
SAN DIEGO, CA 92103

☎ Phone: (800) 765-2737  
Fax: (619) 291-6577

☎ After Hours Phone: (800)  
765-2737

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TU 8:30AM-4PM  
W-F 8:30AM-1PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 299936

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SONG, DELU**

Provider ID: 302872

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 7695 CARDINAL CT STE 100  
SAN DIEGO, CA 92123

☎ Phone: (858) 609-7100  
Fax: (858) 609-7106

☎ After Hours Phone: (858)  
609-7100

Provider Gender: Male

NPI: 1437689536

☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **YAMADA, KENTARO**

Provider ID: 295848

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。












## D. 专家名录

 1040 UNIVERSITY AVE STE B209A  
 SAN DIEGO, CA 92103  
 Phone: (619) 299-1100  
 Fax: (619) 299-7156  
 After Hours Phone: (619) 299-1100  
 Provider Gender: Male  
 NPI: 1629047188  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Japanese, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### **OPTOMETRIST**



#### **AOTO, KIM**




Provider ID: 268718  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111  
 Phone: (800) 898-2020  
 Fax: (844) 897-3788

 After Hours Phone: (800) 898-2020  
 Provider Gender: Female  
 NPI: 1780935650  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 9AM-5PM  
 TU 8:30AM-4:30PM  
 W 7:30AM-4:30PM  
 TH 9:30AM-5PM  
 F 8:30AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### **OPTOMETRIST**







#### **AOTO, KIM**

Provider ID: 296795  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111  
 Phone: (800) 898-2020  
 Fax: (844) 897-3788  
 After Hours Phone: (800) 898-2020  
 Provider Gender: Female  
 NPI: 1780935650  
 Provider English Spoken: Y  
 Provider Language(s)

Spoken: Vietnamese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 9AM-5PM  
 TU 8:30AM-4:30PM  
 W 7:30AM-4:30PM  
 TH 9:30AM-5PM  
 F 8:30AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **AOTO, KIM**

Provider ID: 268723  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115  
 Phone: (800) 898-2020  
 Fax: (844) 897-3788  
 After Hours Phone: (800) 898-2020  
 Provider Gender: Female  
 NPI: 1780935650  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### OPTOMETRIST

---

#### JOMOC, CAITLIN

Provider ID: 304156  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1861164642

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER  
Website: N/A  
IPA: UCSD Medical Group

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### OPTOMETRIST

---

#### JOMOC, CAITLIN

Provider ID: 304155  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1861164642

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER  
Website: N/A  
IPA: UCSD Medical Group

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### OPTOMETRIST

---

#### KIM, PHILIP

Provider ID: 287910  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
Phone: (800) 926-8372  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8372

Provider Gender: Male  
NPI: 1376929034

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

---

### OPTOMETRIST

---

#### SCHWAB, GARY

Provider ID: 290411  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
4290 POLK AVE  
SAN DIEGO, CA 92105  
Phone: (619) 563-0250  
Fax: (858) 633-4681  
After Hours Phone: (619)  
563-0250

Provider Gender: Male  
NPI: 1740274372

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER  
Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### OPTOMETRIST

---

#### SCHWAB, GARY

Provider ID: 290410  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
6973 LINDA VISTA RD

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## D. 专家名录

SAN DIEGO, CA 92111  
☎ Phone: (858) 279-0925  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858) 279-0925  
Provider Gender: Male  
NPI: 1740274372  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **OPTOMETRIST**

**VO, ANDREW**  
Provider ID: 201312  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR STE 101  
SAN DIEGO, CA 92103  
☎ Phone: (619) 543-7907  
🕒 After Hours Phone: (619) 543-7907  
Provider Gender: Male  
NPI: 1790291565  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OPTOMETRIST**

**VO, ANDREW**  
Provider ID: 304147  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1790291565

🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OPTOMETRIST**

**YU, CAROL**  
Provider ID: 301684  
Board Certified Specialty: No

UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1639697451  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OPTOMETRIST**

**YU, CAROL**  
Provider ID: 301680  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1639697451  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): NETWORK

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OPTOMETRIST**


---

#### **YU, CAROL**

Provider ID: 301683

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639697451


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **ORAL MAXILLOFACIAL SURGEON**

---


#### **DENTICO-OLIN, MARC**

Provider ID: 304727

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

 2878 CAMINO DEL RIO S  
STE 210

SAN DIEGO, CA 92108

 Phone: (619) 298-2200

Fax: (619) 298-2250

 After Hours Phone: (619)  
298-2200

Provider Gender: Male

NPI: 1629205174

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **ORAL MAXILLOFACIAL SURGEON**

---


#### **DENTICO-OLIN, MARC**

Provider ID: 273663


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 501 WASHINGTON ST STE  
710

SAN DIEGO, CA 92103

 Phone: (619) 295-6774

Fax: (619) 295-6776

 After Hours Phone: (619)  
295-6774

Provider Gender: Male

NPI: 1629205174

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **OSTEOPATHIC MANIPULATIVE THERAPY**

---

#### **PORTERA, ARIEL**

Provider ID: 273321

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

926-8273

Provider Gender: Female

NPI: 1841721784

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### OTOLARYNGOLOGY

#### **BLISS, MORGAN**


Provider ID: 272565

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)  
309-7701

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network


### OTOLARYNGOLOGY

#### **BRUMUND, KEVIN**

Provider ID: 299635

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **BRUMUND, KEVIN**

Provider ID: 299634

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **CALIFANO, JOSEPH**

Provider ID: 299461

Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### CALIFANO, JOSEPH


Provider ID: 299462

Board Certified Specialty: No

UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### CALIFANO, JOSEPH


Provider ID: 299457

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### CARVALHO, DANIELA


Provider ID: 272557

Board Certified Specialty: No

RADY CHILDRENS HEALTH

### NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)  
309-7701

Provider Gender: Female

NPI: 1154492916

 Provider English Spoken: Y  
 Provider Language(s)

Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### OTOLARYNGOLOGY

#### CARVALHO, DANIELA

Provider ID: 205628

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3030 CHILDRENS WAY STE  
109

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 309-7702  
📞 After Hours Phone: (858) 309-7702  
Provider Gender: Female  
NPI: 1154492916  
☑ Provider English Spoken: Y  
☑ Provider Language(s) Spoken: French, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### OTOLARYNGOLOGY

#### **COFFEY, CHARLES**

Provider ID: 299583  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)

926-8273  
Provider Gender: Male  
NPI: 1932297330  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **COFFEY, CHARLES**

Provider ID: 299582  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1932297330  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

#### **COFFEY, CHARLES**

Provider ID: 299579  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (619) 543-6631  
Fax: (619) 471-0656  
📞 After Hours Phone: (619) 543-6631  
Provider Gender: Male  
NPI: 1932297330  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

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## D. 专家名录

### **DECONDE, ADAM**

Provider ID: 299569

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

### **DECONDE, ADAM**

Provider ID: 299567

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

### **DECONDE, ADAM**

Provider ID: 299568

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

### **FRIEDMAN, RICK**

Provider ID: 299531

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIH  
HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP  
OF LOS ANGELES, SOUTH  
COAST GLOBAL MEDICAL  
CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,  
ORANGE COUNTY GLOBAL  
MEDICAL CENTER INC,  
CHAPMAN GLOBAL MEDICAL  
CENTER INC, UCSD LA JOLLA  
JOHN SALLY THORNTON,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): CTR

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

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#### **FRIEDMAN, RICK**

Provider ID: 299530

Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,

ORANGE COUNTY GLOBAL

MEDICAL CENTER INC,

CHAPMAN GLOBAL MEDICAL

CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): CTR

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

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#### **FRIEDMAN, RICK**

Provider ID: 299532

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN  
HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,

ORANGE COUNTY GLOBAL

MEDICAL CENTER INC,

CHAPMAN GLOBAL MEDICAL

CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

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#### **FRIESEN, TZYYNONG**

Provider ID: 272604


Board Certified Specialty: Yes

RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)  
309-7701

Provider Gender: Female

NPI: 1952740177

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

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### **OTOLARYNGOLOGY**

#### **GILANI, SAPIDEH**

Provider ID: 299561  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
📠 Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1003825571  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

🗿 Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

#### **GILANI, SAPIDEH**

Provider ID: 299559

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
📞 Phone: (800) 926-8273  
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1003825571  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

🗿 Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

#### **GILANI, SAPIDEH**

Provider ID: 299560  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
📞 Phone: (800) 926-8273  
📠 Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1003825571  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
🗿 Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **OTOLARYNGOLOGY**

#### **GREENE, JACQUELINE**

Provider ID: 298397  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
📞 Phone: (800) 926-8273  
📠 Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1144583931  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>GREENE, JACQUELINE</b></p> <p>Provider ID: 298396</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1144583931</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>GREENE, JACQUELINE</b></p> <p>Provider ID: 272959</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p>	<p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1144583931</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>HARRIS, JEFFREY</b></p> <p>Provider ID: 299575</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1417988783</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p>	<p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>HARRIS, JEFFREY</b></p> <p>Provider ID: 299576</p> <p>Board Certified Specialty: No</p> <p>UCSD MEDICAL GROUP</p> <p> 8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1417988783</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p><b>OTOLARYNGOLOGY</b></p>
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## D. 专家名录

### HOM, DAVID

Provider ID: 299515

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

### HOM, DAVID

Provider ID: 299514

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

### HOM, DAVID

Provider ID: 299511

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (858) 657-8590

After Hours Phone: (858)  
657-8590

Provider Gender: Male

NPI: 1659305027

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY

### HUSSEMAN, JACOB

Provider ID: 301052

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124034053

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **HUSSEMAN, JACOB**

Provider ID: 301053

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124034053

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **JIANG, WEN**

Provider ID: 272660

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)  
309-7701

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

### **OTOLARYNGOLOGY**

#### **KARI, ELINA**

Provider ID: 299443

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (619) 543-6631

After Hours Phone: (619)  
543-6631

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS  
ANGELES, PIH HEALTH  
HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **KARI, ELINA**

Provider ID: 299445

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780860536





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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
 CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

### OTOLARYNGOLOGY

#### **KARI, ELINA**




*Provider ID: 299446*  
*Board Certified Specialty: No*  
 UCSD MEDICAL GROUP  
 8899 UNIVERSITY CENTER LN  
 SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1780860536*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation:*  
 CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

### OTOLARYNGOLOGY





#### **LEUIN, SHELBY**

*Provider ID: 272637*  
*Board Certified Specialty: No*  
 RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 1  
 SAN DIEGO, CA 92123  
 *Phone: (858) 309-7701*  
*Fax: (858) 966-8038*  
 *After Hours Phone: (858) 309-7701*  
*Provider Gender: Female*  
*NPI: 1124230909*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### OTOLARYNGOLOGY




#### **MAGIT, ANTHONY**

*Provider ID: 272767*  
*Board Certified Specialty: Yes*  
 RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 1  
 SAN DIEGO, CA 92123  
 *Phone: (855) 309-7701*  
*Fax: (858) 966-4062*  
 *After Hours Phone: (855) 309-7701*  
*Provider Gender: Male*  
*NPI: 1891858379*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*

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## D. 专家名录

N



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

### **OTOLARYNGOLOGY**

#### **MAGIT, ANTHONY**

*Provider ID: 299481*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1891858379*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **MAGIT, ANTHONY**

*Provider ID: 299480*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*



 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1891858379*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **MAGIT, ANTHONY**

*Provider ID: 299482*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*



 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1891858379*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **MATSUOKA, AKIHIRO**

*Provider ID: 299592*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

















 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1669630653*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

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## D. 专家名录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>MATSUOKA, AKIHIRO</b></p> <p><i>Provider ID: 299590</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>UCSD MEDICAL GROUP</i></p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1669630653</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>MATSUOKA, AKIHIRO</b></p> <p><i>Provider ID: 299591</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>UCSD MEDICAL GROUP</i></p> <p> 8899 UNIVERSITY CENTER LN</p>	<p>SAN DIEGO, CA 92122</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1669630653</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>NGUYEN, QUYEN</b></p> <p><i>Provider ID: 299607</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>UCSD MEDICAL GROUP</i></p> <p> 8899 UNIVERSITY CENTER LN</p> <p>SAN DIEGO, CA 92122</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1477524452</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Vietnamese</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD</i></p>	<p><i>MEDICAL CTR, SCRIPPS GREEN HOSPITAL</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>NGUYEN, QUYEN</b></p> <p><i>Provider ID: 299606</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>UCSD MEDICAL GROUP</i></p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1477524452</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Vietnamese</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>
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## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group

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### OTOLARYNGOLOGY

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#### **NGUYEN, QUYEN**

Provider ID: 299603  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (619) 543-6631

Fax: (619) 543-6532

 After Hours Phone: (619)  
543-6631

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### OTOLARYNGOLOGY

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#### **PATEL, VIJAY**


Provider ID: 297037

Board Certified Specialty: No


RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY STE  
1

SAN DIEGO, CA 92123


 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)  
309-7701

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### OTOLARYNGOLOGY

---

#### **VAHABZADEH-HAGH,**

#### **ANDREW**


Provider ID: 299509

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### OTOLARYNGOLOGY

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#### **VAHABZADEH-HAGH,**

#### **ANDREW**

Provider ID: 299508


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273



Provider Gender: Male

NPI: 1346506920

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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **VAHABZADEH-HAGH, ANDREW**



*Provider ID: 299507*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*  
*NPI: 1346506920*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED*



*CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


### **OTOLARYNGOLOGY**

#### **WATSON, DEBORAH**



*Provider ID: 299641*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1346270816*




 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OTOLARYNGOLOGY**

#### **WATSON, DEBORAH**

*Provider ID: 299642*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1346270816*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*  
*IPA: UCSD Medical Group*

### **OTOLARYNGOLOGY**

#### **WATSON, DEBORAH**

*Provider ID: 299639*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (619) 543-6631*  
 *After Hours Phone: (619)*

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## D. 专家名录

543-6631  
Provider Gender: Female  
NPI: 1346270816  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**WEISSBROD, PHILIP**  
Provider ID: 299610  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR STE 505  
SAN DIEGO, CA 92103  
☎ Phone: (858) 657-8590  
📞 After Hours Phone: (858)  
657-8590  
Provider Gender: Male  
NPI: 1366590853  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**WEISSBROD, PHILIP**  
Provider ID: 299615  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1366590853  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY

**WEISSBROD, PHILIP**  
Provider ID: 299614

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1366590853  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### OTOLARYNGOLOGY


**YAN, CAROL**  
Provider ID: 298413  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**


#### **YAN, CAROL**

Provider ID: 298412

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **YAN, CAROL**

Provider ID: 298414

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC**


#### **FADARE, OLUWOLE**

Provider ID: 275705

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (619) 543-5764

Fax: (619) 543-5249

 After Hours Phone: (619)  
543-5764

Provider Gender: Male

NPI: 1619955804

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):



N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### **PATHOLOGY ANATOMIC**

#### **HANSEN, LAWRENCE**

Provider ID: 275767  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (619) 543-5764  
 After Hours Phone: (619)  
543-5764

Provider Gender: Male  
NPI: 1760407498

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A



IPA: UCSD Medical Group

---

### **PATHOLOGY ANATOMIC**


#### **PARAST, MANA**

Provider ID: 275888  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1629163100

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **PATHOLOGY ANATOMIC**


#### **WONG, RICHARD**

Provider ID: 243202  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1275084295

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group



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### **PATHOLOGY ANATOMIC**

#### **CLINICAL**



#### **ALLEN, ELIZABETH**

Provider ID: 275756  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1174814065

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, SCRIPPS


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
UCSD MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS GREEN HOSPITAL,  
SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PATHOLOGY ANATOMIC CLINICAL

#### **BROOME, HELEN**

Provider ID: 275720

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1184674145

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PATHOLOGY ANATOMIC CLINICAL

#### **BROOME, HELEN**

Provider ID: 275721

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1184674145

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PATHOLOGY ANATOMIC CLINICAL

#### **BUI, JACK**

Provider ID: 247581

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1942529821

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC

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## D. 专家名录

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**CLINICAL**

---

**BUI, JACK**  
Provider ID: 247580  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1942529821  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

---

**PATHOLOGY ANATOMIC  
CLINICAL**

---

**QUINTANA, PAULINA**  
Provider ID: 296765  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
292 EUCLID AVE STE 115

SAN DIEGO, CA 92114  
Phone: (619) 266-3332  
Fax: (619) 266-6000  
After Hours Phone: (619) 266-3332  
Provider Gender: Female  
NPI: 1164482477  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PARADISE  
VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

---

**PATHOLOGY ANATOMIC  
CLINICAL**

---

**ROMA, ANDRES**  
Provider ID: 275826  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1295912657

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

---

**PATHOLOGY ANATOMIC  
CLINICAL**

---

**SHABAIK, AHMED**  
Provider ID: 275781  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1679521579  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


### THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC CLINICAL

### SONG, WEI

Provider ID: 300001

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1306164157


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### PATHOLOGY ANATOMIC


### CLINICAL

### STEPHENS, LAURA

Provider ID: 300042

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1942561212


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### PATHOLOGY ANATOMIC CLINICAL

### VAVINSKAYA, VERA


Provider ID: 275789

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174757181

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PATHOLOGY ANATOMIC CLINICAL

### WANG, DEHUA

Provider ID: 289153

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 966-6776

Fax: (858) 966-6707

 After Hours Phone: (858)  
966-6776

Provider Gender: Female

NPI: 1578790655

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: RADY

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## D. 专家名录

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### **PATHOLOGY CLINICAL**


**KELNER, MICHAEL**

Provider ID: 247601

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1174679849

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, EL CENTRO REGIONAL  
MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY CLINICAL**


**KELNER, MICHAEL**

Provider ID: 247602

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1174679849

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, EL CENTRO REGIONAL  
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **PATHOLOGY CLINICAL**


**LE DZUNG, THE**

Provider ID: 247600

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770526931

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY CLINICAL**

**LE DZUNG, THE**

Provider ID: 247599

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

926-8273  
Provider Gender: Male  
NPI: 1770526931  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

### PEDIATRIC ALLERGY / IMMUNOLOGY

**ALKATIB, RHONDA**  
Provider ID: 291226  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
2655 CAMINO DEL RIO N  
STE 425  
SAN DIEGO, CA 92108  
Phone: (619) 286-6687  
Fax: (619) 286-6695  
After Hours Phone: (619)  
286-6687  
Provider Gender: Female  
NPI: 1417363086

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: ALVARADO  
HOSP MED CTR, ALVARADO  
HOSPITAL LLC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC ALLERGY / IMMUNOLOGY

**COLLINS, CATHLEEN**  
Provider ID: 206083  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
3030 CHILDRENS WAY STE  
2  
SAN DIEGO, CA 92123  
Phone: (858) 966-5961  
After Hours Phone: (858)  
966-5961  
Provider Gender: Female  
NPI: 1205128089  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: LUCILE  
SALTER PACKARD  
CHILDRENS HOSP, Stanford  
Health Care, RADY

CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC ALLERGY / IMMUNOLOGY

**GENG, BOB**  
Provider ID: 205824  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
3030 CHILDRENS WAY STE  
2  
SAN DIEGO, CA 92123  
Phone: (858) 966-5961  
After Hours Phone: (858)  
966-5961  
Provider Gender: Male  
NPI: 1356570758  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL):  N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC ALLERGY / IMMUNOLOGY


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#### **GENG, BOB**

Provider ID: 205823

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 5776 RUFFIN RD  
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858) 292-1144

Provider Gender: Male

NPI: 1356570758

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

---

### PEDIATRIC ALLERGY / IMMUNOLOGY


---


#### **GREINER, ALEXANDER**

Provider ID: 205697

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK



 5776 RUFFIN RD  
SAN DIEGO, CA 92123

 Phone: (858) 966-4900

 After Hours Phone: (858) 966-4900

Provider Gender: Male

NPI: 1609801299

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, German,  
Spanish


Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC ALLERGY / IMMUNOLOGY


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#### **LEIBEL, SYDNEY**

Provider ID: 205724

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 5776 RUFFIN RD  
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858) 292-1144

Provider Gender: Male

NPI: 1861666919


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC ALLERGY / IMMUNOLOGY

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#### **LEIBEL, SYDNEY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 205725

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2 NORTH  
SAN DIEGO, CA 92123

Phone: (858) 966-5961

After Hours Phone: (858)  
966-5961

Provider Gender: Male

NPI: 1861666919

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC CARDIOLOGY**

#### **BOCK, MATTHEW**

Provider ID: 280463

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1356514624

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: LOMA  
LINDA UNIVERSITY MED CTR,  
LOMA LINDA UNIVERSITY  
CHILDRENS HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC CARDIOLOGY**

#### **BORQUEZ, ALEJANDRO**

Provider ID: 284120

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)  
966-5855

Provider Gender: Female

NPI: 1114277787

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC CARDIOLOGY**

#### **CHAU, PETER**

Provider ID: 271427

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1407146947

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: LOMA  
LINDA UNIVERSITY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

### PEDIATRIC CARDIOLOGY

#### DAVIS, CHRISTOPHER

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC CARDIOLOGY

#### DO, THOMAS

Provider ID: 206162

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 366-5855

Fax: (858) 966-7423

 After Hours Phone: (858)  
366-5855

Provider Gender: Male

NPI: 1053545376

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, CHILDRENS HOSPITAL  
AT MISSION, CHILDRENS  
HOSPITAL OF ORANGE  
COUNTY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC CARDIOLOGY

#### DUMMER, KIRSTEN

Provider ID: 260595

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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## D. 专家名录

### **PEDIATRIC CARDIOLOGY**

#### **GOLDING, IAN**

Provider ID: 210823

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1962974956

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

Fax: (858) 966-7903

After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1669480083

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: POMONA  
VALLEY HOSP MED CTR,

SANTA MONICA UCLA MED  
CTR, SAN ANTONIO COMM

HOSP, LOMA LINDA

UNIVERSITY CHILDRENS

HOSPITAL, LOMA LINDA

UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

After Hours Phone: (858)  
966-5855

Provider Gender: Female

NPI: 1023329885

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC CARDIOLOGY**

#### **JUSTINO, HENRI**

Provider ID: 284123

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1518036821

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

### **PEDIATRIC CARDIOLOGY**

#### **HALEY, JESSICA**

Provider ID: 205687

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

### **PEDIATRIC CARDIOLOGY**

#### **GORDON, BRENT**

Provider ID: 295391

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855

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## D. 专家名录


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### **PEDIATRIC CARDIOLOGY**

**LEHNERT SCHUCHARDT, ELEANOR**

Provider ID: 262250

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1760707210

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### **PEDIATRIC CARDIOLOGY**

**MCCANDLESS, RACHEL**

Provider ID: 206147

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-4912

Fax: (858) 966-7903

 After Hours Phone: (858) 966-4912

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### **PEDIATRIC CARDIOLOGY**


**MUELLER, DANA**

Provider ID: 245535

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1184915712


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**

Provider ID: 205349


Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

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## D. 专家名录

### NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1376705707


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **PEDIATRIC CARDIOLOGY**

#### **RAO, ROHIT**

Provider ID: 206122

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1063452779

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **PEDIATRIC CARDIOLOGY**

#### **SAH, SERENA**


Provider ID: 206215

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123



 Phone: (858) 966-5855

Fax: (858) 966-7423

 After Hours Phone: (858)  
966-5855

Provider Gender: Female

NPI: 1295042653

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **PEDIATRIC CARDIOLOGY**

#### **SILVA SEPULVEDA, JOSE**

Provider ID: 206297

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes




Min/Max Age: 0\19

American Sign Language (ASL):  
N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*


### **PEDIATRIC CARDIOLOGY**

#### **STEINBERG, LEONARD**



*Provider ID: 248208*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-5855*  
 *After Hours Phone: (858) 966-5855*

*Provider Gender: Male*  
*NPI: 1538279484*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*


### **PEDIATRIC CARDIOLOGY**

#### **STRINGER, JESSE**

*Provider ID: 206296*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH*


#### **NETWORK**

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5855*  
*Fax: (858) 966-7903*

 *After Hours Phone: (858) 966-5855*



*Provider Gender: Male*  
*NPI: 1972745388*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*


*IPA: Rady Childrens Health Network*

### **PEDIATRIC CARDIOLOGY**

#### **VAUGHN, GABRIELLE**


*Provider ID: 205643*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 576-1700*  
*Fax: (858) 966-7423*

 *After Hours Phone: (858) 576-1700*



*Provider Gender: Female*  
*NPI: 1891004461*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*  
 *Website: N/A*


*IPA: Rady Childrens Health Network*

### **PEDIATRIC CARDIOLOGY**

#### **VELLORE GOVARDHAN, SHILPA**

*Provider ID: 271454*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5855*  
*Fax: (858) 966-7903*

 *After Hours Phone: (858) 966-5855*




*Provider Gender: Female*  
*NPI: 1477702165*

 *Provider English Spoken: Y*

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## D. 专家名录




Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network


### **PEDIATRIC CARDIOLOGY**

#### **WERHO, DAVID**


Provider ID: 206316  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5855  
Fax: (858) 966-7903  
 After Hours Phone: (858)  
966-5855


Provider Gender: Male  
NPI: 1235391863

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  Website: N/A  
N  
IPA: Rady Childrens Health  
Network

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network

### **PEDIATRIC CARDIOLOGY**

#### **WILLIAMS, MATTHEW**

Provider ID: 206287  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7423

 After Hours Phone: (858)  
966-5855


Provider Gender: Male  
NPI: 1831423250


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSF BENIOFF CHILDREN'S  
HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

### **PEDIATRIC CARDIOLOGY**

#### **YUNOSZAI, ADEL**

Provider ID: 303133  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Male


NPI: 1952493819


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC DERMATOLOGY**

#### **EICHENFIELD, DAWN**

Provider ID: 283142

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## D. 专家名录

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-6795  
Fax: (858) 966-7479

After Hours Phone: (858)  
966-6795

Provider Gender: Female  
NPI: 1295198091

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC DERMATOLOGY

**EICHENFIELD, DAWN**

Provider ID: 303679

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7910 FROST ST STE 120  
SAN DIEGO, CA 92123

Phone: (858) 966-6795  
Fax: (858) 966-7479

After Hours Phone: (858)  
966-6795

Provider Gender: Female  
NPI: 1295198091

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

**AGHILI, ROXANA**

Provider ID: 304918

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-8800  
After Hours Phone: (858)  
966-8800

Provider Gender: Female  
NPI: 1851927883

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi

Cultural Competency: N  
Hospital Affiliation: KAISER  
FOUNDATION HOSPITAL SAN  
DIEGO, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

**AGHILI, ROXANA**

Provider ID: 303780

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)  
280-2905

Provider Gender: Female  
NPI: 1851927883

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi

Cultural Competency: N  
Hospital Affiliation: KAISER  
FOUNDATION HOSPITAL SAN

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


DIEGO, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


**AMIRNOVIN, RAMBOD**

Provider ID: 297673

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1629104492

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS  
ANGELES, LOMA LINDA  
UNIVERSITY CHILDRENS

HOSPITAL, LOMA LINDA  
UNIVERSITY MED CTR, RADY

CHILDRENS HOSPITAL SAN  
DIEGO, LONG BEACH

MEMORIAL MED CTR, EARL  
AND LORRAINE MILLER

CHILDRENS HSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


**AUSTIN-PAGE, LUKAS**

Provider ID: 205589

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1326301862

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS  
ANGELES, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


**BELLOMO, THOMAS**

Provider ID: 205601

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)  
280-2905

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE


#### **BETTY, MARYANN RIVA**

Provider ID: 245754

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1285014498

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE

#### **BETTY, MARYANN RIVA**

Provider ID: 257396

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1285014498

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE


#### **BIALOSTOZKY, MARIO**

Provider ID: 206011

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1609281450

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL  
CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

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## D. 专家名录

<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>	<b><u>MEDICINE</u></b>	<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>
<b>BRYL, AMY</b> Provider ID: 205967 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-8800  After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1497079487  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: Rady Childrens Health Network	<b>CAMPBELL, SARA</b> Provider ID: 206335 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-8800  After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1841687563  Provider English Spoken: Y  Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: N Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network	<b>RADY CHILDRENS HEALTH NETWORK</b>  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-8800  After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1700047628  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: No Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network
<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>	<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>	<b><u>PEDIATRIC EMERGENCY MEDICINE</u></b>
	<b>CHOO, SUN</b> Provider ID: 296535 Board Certified Specialty: No	<b>CHOO, SUN</b> Provider ID: 296536 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  Phone: (619) 280-2905 Fax: (619) 283-1614

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (619) 280-2905*

*Provider Gender: Female*

*NPI: 1700047628*

☑ *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: SU 1PM-10PM*

*M-F 4PM-10PM*

*SA 1PM-10PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST*

*HEALTHCARE INLAND*

*VALLEY HOSPITAL, SHARP*

*CHULA VISTA MED CTR, UCSF*

*BENIOFF CHILDREN'S*

*HOSPITAL OAKLAND,*

*SOUTHWEST HEALTHCARE*

*RANCHO SPRINGS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

☑ *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY*

*CHILDRENS HOSPITAL SAN*

*DIEGO, UCSF BENIOFF*

*CHILDREN'S HOSPITAL*

*OAKLAND, SCRIPPS*

*MEMORIAL HOSPITAL*

*ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **CONRAD, HEATHER**

*Provider ID: 205960*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-8800*

☎ *After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1205813409*

☑ *Provider English Spoken: Y*

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **DEL RE, ANGELO**

*Provider ID: 206081*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-8800*

☎ *After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1275761371*

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **DEVERA, GEMMIE**

*Provider ID: 288572*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-8800*

☎ *After Hours Phone: (858) 966-8800*

*Provider Gender: Female*



*NPI: 1366622078*

☑ *Provider English Spoken: Y*

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## D. 专家名录




Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE



#### **DO, STEPHANIE**

Provider ID: 287393  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female  
NPI: 1750513644




 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Martin  
Luther King Jr Community  
Hospital, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE



#### **DONOFRIO-ODMANN, JOY**

Provider ID: 205375  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female  
NPI: 1740571165




 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: VALLEY  
CHILDRENS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network



### PEDIATRIC EMERGENCY MEDICINE

#### **DORWART, ELIZABETH**

Provider ID: 294260  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800




Provider Gender: Female  
NPI: 1609132034

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: LUCILE  
SALTER PACKARD  
CHILDRENS HOSP, Stanford  
Health Care, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录







 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*


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### PEDIATRIC EMERGENCY MEDICINE

---

#### **EKPENYONG, ATIM**

*Provider ID: 205722*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 576-1700*  
 *After Hours Phone: (858) 576-1700*  
*Provider Gender: Female*  
*NPI: 1932318565*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### PEDIATRIC EMERGENCY MEDICINE

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#### **FISHER, JAY**

*Provider ID: 295690*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Male*  
*NPI: 1629118518*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### PEDIATRIC EMERGENCY MEDICINE

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#### **GAHM, CLAIRE**

*Provider ID: 301305*  
*Board Certified Specialty: Yes*  
*RADY CHILDRENS HEALTH*

#### **NETWORK**




 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Female*  
*NPI: 1750709077*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: No*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### PEDIATRIC EMERGENCY MEDICINE





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#### **GIBONEY, JENNIFER**

*Provider ID: 205925*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*





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## D. 专家名录

Provider Gender: Female  
NPI: 1275895849  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE





#### **GORHAM, LAURA**




Provider ID: 275784  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
 Phone: (619) 280-2058  
Fax: (858) 633-4682  
 After Hours Phone: (619)  
280-2058  
Provider Gender: Female  
NPI: 1316162324  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE




#### **GROSS, MATTHEW**

Provider ID: 297172  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
 Phone: (619) 280-2905  
Fax: (619) 283-1614  
 After Hours Phone: (619)  
280-2905  
Provider Gender: Male  
NPI: 1942223664  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **GROSS, MATTHEW**

Provider ID: 297174  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Male  
NPI: 1942223664  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

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## D. 专家名录

 Website: N/A  
IPA: Rady Childrens Health  
Network




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### **PEDIATRIC EMERGENCY** **MEDICINE**


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#### **HERSKOVITZ, SCOTT**

Provider ID: 261045  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Male  
NPI: 1225393499

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network




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### **PEDIATRIC EMERGENCY** **MEDICINE**


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#### **HUNTER, WENDY**

Provider ID: 206278  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800


Provider Gender: Female  
NPI: 1053515551

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network




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### **PEDIATRIC EMERGENCY** **MEDICINE**


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#### **INDRA, SEAN**

Provider ID: 302625  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800


Provider Gender: Male  
NPI: 1427349091

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, VALLEY CHILDRENS  
HOSPITAL

Medi-Cal Open Panel: No  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: Rady Childrens Health  
Network




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### **PEDIATRIC EMERGENCY** **MEDICINE**

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#### **ISHIMINE, PAUL**


Provider ID: 206236  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Male  
NPI: 1437184421

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **JACKSON, TAYLOR**



Provider ID: 302127  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5999  
Fax: (858) 966-8519  
 After Hours Phone: (858)  
966-5999  
Provider Gender: Male  
NPI: 1326543752  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE








#### **JOSHI, WEENA**

Provider ID: 262232  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800  
Provider Gender: Female  
NPI: 1376862177  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **JOSHI, WEENA**

Provider ID: 262234  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
 Phone: (619) 280-2905  
Fax: (619) 283-1614  
 After Hours Phone: (619)  
280-2905  
Provider Gender: Female  
NPI: 1376862177  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

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## D. 专家名录

<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>KHAN, SHAHFAR</b> Provider ID: 294094 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p> <p>3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-8800 After Hours Phone: (858) 966-8800</p> <p>Provider Gender: Female NPI: 1013361815</p> <p>Provider English Spoken: Y Provider Language(s) Spoken: Hindi, Urdu Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>LOVEJOY, AMY</b> Provider ID: 302317 Board Certified Specialty: No</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>LOVEJOY, AMY</b> Provider ID: 262029 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>RADY CHILDRENS HEALTH NETWORK</b></p> <p>4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105 Phone: (619) 280-2905 Fax: (619) 283-1614 After Hours Phone: (619) 280-2905</p> <p>Provider Gender: Female NPI: 1609495399</p> <p>Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>NETWORK</b></p> <p>3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 309-7701 Fax: (858) 966-8038 After Hours Phone: (858) 309-7701</p> <p>Provider Gender: Female NPI: 1790856557</p> <p>Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>
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## D. 专家名录

Fax: (619) 283-1614

☎ After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1790856557

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **MCDANIEL, MICHELE**

Provider ID: 248071

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1366761959

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

### PEDIATRIC EMERGENCY MEDICINE

#### **MENDES, CHANTAL**

Provider ID: 295668

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2905

Fax: (619) 283-1614

☎ After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1134681265

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **MESIWALA, ADNAN**

Provider ID: 275654

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1528483955

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **METCALF, ASHLEY**

Provider ID: 205348

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1073740205

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **MILLS, DAVID**

Provider ID: 302146

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1194145946

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **MINKA, GENEVIEVE**

Provider ID: 205336

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1689646689

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

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## D. 专家名录

<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>MINKA, GENEVIEVE</b> Provider ID: 205334 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-8800 After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1689646689 Provider English Spoken: Y Provider Language(s) Spoken: French Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network</p>	<p>Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 8110 BIRMINGHAM WAY FL 1 SAN DIEGO, CA 92123 Phone: (858) 966-7785 After Hours Phone: (858) 966-7785 Provider Gender: Female NPI: 1689646689 Provider English Spoken: Y Provider Language(s) Spoken: French Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: No Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>	<p>3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 576-1700 After Hours Phone: (858) 576-1700 Provider Gender: Female NPI: 1689612830 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>
<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>MINKA, GENEVIEVE</b> Provider ID: 262107</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>MISHRA-OCCHINO, SEEMA</b> Provider ID: 205404 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>MONTBLEAU, KARA</b> Provider ID: 299240 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-8800 After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1164981197</p>

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## D. 专家名录

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE





#### **MURRAY, MATTHEW**




Provider ID: 205759  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800  
Provider Gender: Male  
NPI: 1215103023  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, RADY

CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE








#### **NGUYEN, MARGARET**

Provider ID: 270705  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800  
Provider Gender: Female  
NPI: 1942485248  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **NGUYEN, MYLINH**

Provider ID: 262299  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800  
Provider Gender: Female  
NPI: 1730428053  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health

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## D. 专家名录


Network


### PEDIATRIC EMERGENCY MEDICINE

#### **OZAKI, YOSHIHIRO**

Provider ID: 241926

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105


 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)  
280-2905

Provider Gender: Male

NPI: 1467898239

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese


Cultural Competency: N

Hospital Affiliation: VALLEY  
CHILDRENS HOSPITAL, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **OZCAN, ALI**

Provider ID: 287923

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1265867683

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, LOMA LINDA  
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **PADE, KATHRYN**

Provider ID: 262411

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1215375183

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **PARK, BRIAN**






Provider ID: 302352





Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK





 3020 CHILDRENS WAY

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## D. 专家名录

SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858) 966-8800  
 Provider Gender: Male  
 NPI: 1710418744  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
 IPA: Rady Childrens Health Network




Provider Gender: Male  
 NPI: 1881695914  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
 Medi-Cal Open Panel: No  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health Network

 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health Network





### PEDIATRIC EMERGENCY MEDICINE

**PARK, RONALD**  
 Provider ID: 295457  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 4305 UNIVERSITY AVE STE 150  
 SAN DIEGO, CA 92105  
 Phone: (619) 280-2905  
 Fax: (619) 283-1614  
 After Hours Phone: (619) 280-2905

### PEDIATRIC EMERGENCY MEDICINE




**PARKER, SHERINE**  
 Provider ID: 205784  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858) 966-8800  
 Provider Gender: Female  
 NPI: 1477626513

### PEDIATRIC EMERGENCY MEDICINE






**QUINONES-PEREZ, BIANCA**  
 Provider ID: 206947  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858) 966-8800  
 Provider Gender: Female  
 NPI: 1124360565  
 Provider English Spoken: Y




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## D. 专家名录





 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*




### PEDIATRIC EMERGENCY MEDICINE

**QUINONES-PEREZ, BIANCA**  
*Provider ID: 206949*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 4305 UNIVERSITY AVE STE 150  
 SAN DIEGO, CA 92105  
 *Phone: (619) 280-2905*  
*Fax: (619) 283-1614*  
 *After Hours Phone: (619) 280-2905*  
*Provider Gender: Female*  
*NPI: 1124360565*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY*


*CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM*  
*M-F 4PM-10PM*  
*SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY MEDICINE

**RANASURIYA, DUNISHA**  
*Provider ID: 216970*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Female*  
*NPI: 1740468057*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY MEDICINE

**RATNAYAKE, KRISTIN**  
*Provider ID: 206034*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY MC 5075  
 SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Female*  
*NPI: 1679716658*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*


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## D. 专家名录

American Sign Language (ASL): IPA: Rady Childrens Health  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRIC EMERGENCY MEDICINE


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#### **RUIZ, MONICA**

Provider ID: 305340

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1982059689

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

Network

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### PEDIATRIC EMERGENCY MEDICINE


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#### **RUSSELL, SAMUEL**

Provider ID: 301249

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1215564265

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network

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### PEDIATRIC EMERGENCY MEDICINE

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#### **RUSSELL, SAMUEL**

Provider ID: 301250

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)  
280-2905

Provider Gender: Male

NPI: 1215564265

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRIC EMERGENCY MEDICINE

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#### **SALEH, FAREED**

Provider ID: 206216

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


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## D. 专家名录

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1366691115


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **SCHROTER, STEPHANIE**


Provider ID: 243830

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1073951828


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **SCHWARTZ, KRISTY**


Provider ID: 206169

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female


NPI: 1497080808

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,  
UCSF BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A




IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **SHERER, KIMBERLY**


Provider ID: 284168

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1992202964

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes


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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 301636

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC EMERGENCY MEDICINE


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#### **SHETH, SARIKA**

Provider ID: 248171

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1336503234


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC EMERGENCY MEDICINE


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#### **SOUDER, CHRISTOPHER**

Provider ID: 301636

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC EMERGENCY MEDICINE

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#### **SOUDER, CHRISTOPHER**

Provider ID: 301635

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL  
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)  
966-6789

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### PEDIATRIC EMERGENCY MEDICINE


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#### **TAMAS, VANESSA**

Provider ID: 206212

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)  
576-1700




Provider Gender: Female

NPI: 1326225368

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## D. 专家名录




 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*




### PEDIATRIC EMERGENCY MEDICINE

#### **TANG, ANDREW**

*Provider ID: 294677*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Male*  
*NPI: 1184071516*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY MEDICINE




#### **TODD, SARAH**

*Provider ID: 302800*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  
 *Phone: (619) 280-2905*  
*Fax: (619) 283-1614*  
 *After Hours Phone: (619) 280-2905*  
*Provider Gender: Female*  
*NPI: 1407299787*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED*




*CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY MEDICINE

#### **TRAN, THERESA**

*Provider ID: 301834*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Female*  
*NPI: 1417496985*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish, Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*



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## D. 专家名录

*DIEGO, SOUTHWEST  
HEALTHCARE RANCHO  
SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):*




*N*

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*


### **PEDIATRIC EMERGENCY MEDICINE**

#### **TRAUT, JOEL**

*Provider ID: 205475  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*




 *3020 CHILDRENS WAY  
SAN DIEGO, CA 92123*  
 *Phone: (858) 576-1700*  
 *After Hours Phone: (858)  
576-1700*

*Provider Gender: Male  
NPI: 1982792065*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):*




*N*

 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health  
Network*


### **PEDIATRIC EMERGENCY MEDICINE**

#### **ULRICH, STACEY**

*Provider ID: 205847  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*




 *3020 CHILDRENS WAY  
SAN DIEGO, CA 92123*  
 *Phone: (858) 966-8036*  
 *After Hours Phone: (858)  
966-8036*

*Provider Gender: Female  
NPI: 1619049236*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):*



*N*

 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health  
Network*


### **PEDIATRIC EMERGENCY MEDICINE**

#### **VAIDYA, KAMALA**

*Provider ID: 205811  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*


 *4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105*  
 *Phone: (619) 280-2905*  
*Fax: (619) 283-1614*  
 *After Hours Phone: (619)  
280-2905*


*Provider Gender: Female  
NPI: 1083840920*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT  
PROVIDER*

 *Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM*

 *Website: N/A*  
*IPA: Rady Childrens Health  
Network*

### **PEDIATRIC EMERGENCY MEDICINE**


#### **VAIDYA, KAMALA**


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 205809  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1083840920


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **PEDIATRIC EMERGENCY MEDICINE**


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#### **VAN WOY, LAUREN**

Provider ID: 301574

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)

966-8800

Provider Gender: Female

NPI: 1568959161

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **PEDIATRIC EMERGENCY MEDICINE**


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#### **VANE, JACKSON**

Provider ID: 205883

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1952608580

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **PEDIATRIC EMERGENCY MEDICINE**


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#### **VARGAS, JACLYN**

Provider ID: 285935

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-8479

 After Hours Phone: (858)  
576-1700

Provider Gender: Female

NPI: 1619359718

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Los Angeles General  
Medical Center

Medi-Cal Open Panel: Yes


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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE

#### **VARGAS, JACLYN**

Provider ID: 285934

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)  
966-5841

Provider Gender: Female

NPI: 1619359718

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Los Angeles General  
Medical Center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **VARGAS, JACLYN**

Provider ID: 296486

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)  
280-2905

Provider Gender: Female

NPI: 1619359718

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Los Angeles General  
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **VAYNGORTIN, TATYANA**

Provider ID: 263012

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1578967907

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
CHILDRENS HOSP OF LOS  
ANGELES, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER























 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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## D. 专家名录

<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>PEDIATRIC EMERGENCY MEDICINE</b>
<b>WANG, EMILY</b> Provider ID: 265954 Board Certified Specialty: No <b>RADY CHILDRENS HEALTH NETWORK</b>  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  Phone: (619) 280-2905  Fax: (619) 283-1614  After Hours Phone: (619) 280-2905 Provider Gender: Female NPI: 1427142363  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network	<b>WANG, YVETTE</b> Provider ID: 263416 Board Certified Specialty: No <b>RADY CHILDRENS HEALTH NETWORK</b>  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-8800  After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1710321278  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network	<b>RADY CHILDRENS HEALTH NETWORK</b>  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-8800  After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1427142363  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network
	<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>PEDIATRIC EMERGENCY MEDICINE</b>
	<b>WANG, EMILY</b> Provider ID: 265952 Board Certified Specialty: No	<b>YAPHOCKUN, KAREN KIM</b> Provider ID: 206184 Board Certified Specialty: No <b>RADY CHILDRENS HEALTH NETWORK</b>


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## D. 专家名录

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 576-1700  
 After Hours Phone: (858)  
576-1700

Provider Gender: Female  
NPI: 1861880817

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network


### **PEDIATRIC ENDOCRINOLOGY**

#### **CYMBALUK, ANNA**

Provider ID: 294214

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK


 3030 CHILDRENS WAY STE  
4  
SAN DIEGO, CA 92123

 Phone: (858) 966-4032  
Fax: (858) 966-6227

 After Hours Phone: (858)  
966-4032

Provider Gender: Female


NPI: 1043674849


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network


### **PEDIATRIC ENDOCRINOLOGY**

#### **PATTERSON, MARY**

Provider ID: 206059


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
4 NORTH  
SAN DIEGO, CA 92123

 Phone: (858) 966-4032  
Fax: (858) 966-6227

 After Hours Phone: (858)  
966-4032


Provider Gender: Female  
NPI: 1912112020

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **PEDIATRIC ENDOCRINOLOGY**

#### **SINGH, PUJA**

Provider ID: 302818


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123  
 Phone: (858) 966-4032  
Fax: (858) 966-6227

 After Hours Phone: (858)  
966-4032

Provider Gender: Female  
NPI: 1841721172

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO



Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER








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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network









### PEDIATRIC ENDOCRINOLOGY

#### **VARGAS TRUJILLO, MARCELA**

Provider ID: 205605  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 4  
SAN DIEGO, CA 92123  
 Phone: (858) 966-4032  
Fax: (858) 966-4032  
 After Hours Phone: (858) 966-4032  
Provider Gender: Female  
NPI: 1952534091  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network








### PEDIATRIC GASTROENTEROLOGY

#### **CHU, CHRISTOPHER**

Provider ID: 301639  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
 Phone: (858) 966-4003  
Fax: (858) 560-6798  
 After Hours Phone: (858) 966-4003  
Provider Gender: Male  
NPI: 1912369273  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish, Yue Chinese  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC GASTROENTEROLOGY

#### **GOYAL, NIDHI**

Provider ID: 205598  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3030 CHILDRENS WAY FL 2 SOUTH  
SAN DIEGO, CA 92123  
 Phone: (858) 966-4003  
Fax: (858) 560-6798  
 After Hours Phone: (858) 966-4003  
Provider Gender: Female  
NPI: 1598029332  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC GASTROENTEROLOGY

#### **HARTMANN, PHILLIPP**

Provider ID: 294228

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## D. 专家名录

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)  
966-4003

Provider Gender: Male

NPI: 1356796536

Provider English Spoken: Y

Provider Language(s)

Spoken: French, German

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC GASTROENTEROLOGY

**LIN, TOM**

Provider ID: 297707

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)  
966-4003

Provider Gender: Male

NPI: 1114136934

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC GASTROENTEROLOGY

**PATHAK, SAGAR**

Provider ID: 301825

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)  
966-4003

Provider Gender: Male

NPI: 1700318292

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC GASTROENTEROLOGY

**SCHWARZ, KATHLEEN**

Provider ID: 205885

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)  
966-4003

Provider Gender: Female

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## D. 专家名录

NPI: 1265465918

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC GASTROENTEROLOGY


#### **YOUNG, JOCELYN**

Provider ID: 294675


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)  
966-4003

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UC DAVIS

MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC HEMATOLOGY / ONCOLOGY

#### **BRIGGS, BENJAMIN**


Provider ID: 274689

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)  
966-5811

Provider Gender: Male

NPI: 1952695777

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, NAVAL MEDICAL CTR  
SD RBE

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC HEMATOLOGY / ONCOLOGY


#### **BUSH, KELLY**

Provider ID: 274408

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3010 CHILDRENS WAY STE  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)  
966-5811

Provider Gender: Female

NPI: 1073831079

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):  
N

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

---


### **PEDIATRIC HEMATOLOGY / ONCOLOGY**


---

#### **CHOO, SUN**

*Provider ID: 206115*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 3010 CHILDRENS WAY STE 2-WEST  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5811*

*Fax: (858) 966-8035*

 *After Hours Phone: (858) 966-5811*

*Provider Gender: Female*

*NPI: 1700047628*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health*

*Network*

---

### **PEDIATRIC HEMATOLOGY / ONCOLOGY**


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#### **DING, HILDA**

*Provider ID: 206173*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5811*

*Fax: (858) 966-8035*

 *After Hours Phone: (858) 966-5811*

*Provider Gender: Female*

*NPI: 1780813923*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

---

### **PEDIATRIC HEMATOLOGY / ONCOLOGY**


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#### **ELSTER, JENNIFER**

*Provider ID: 205769*

*Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK*

 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5811*

*Fax: (858) 966-8035*

 *After Hours Phone: (858) 966-5811*

*Provider Gender: Female*

*NPI: 1588866115*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### **PEDIATRIC HEMATOLOGY / ONCOLOGY**

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#### **GANESAN, ANUSHA**

*Provider ID: 205882*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 3010 CHILDRENS WAY

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## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858) 966-5811  
Provider Gender: Female  
NPI: 1982091740  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **JAFFRAY, JULIE**

Provider ID: 296760  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858) 966-5811  
Provider Gender: Female

NPI: 1396942470  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **KUO, DENNIS**

Provider ID: 205433  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858) 966-5811  
Provider Gender: Male  
NPI: 1750492146  
🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **LI, HOJUN**

Provider ID: 307300  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858) 966-5811  
Provider Gender: Male  
NPI: 1730455239  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **SRIDHAR, SUNITA**

Provider ID: 302088  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858)  
966-5811  
Provider Gender: Female  
NPI: 1649707365  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **WONG, VICTOR**

Provider ID: 206149  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858)  
966-5811  
Provider Gender: Male  
NPI: 1154692473  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

---

#### **YU, JENNIFER**

Provider ID: 206148  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858)  
966-5811  
Provider Gender: Female  
NPI: 1326315599  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

---

### PEDIATRIC HEMATOLOGY / ONCOLOGY

---

#### **YU, HELENA**

Provider ID: 301583  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3010 CHILDRENS WAY FL 2

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## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858) 966-5811  
Provider Gender: Female  
NPI: 1881127736  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC HEMATOLOGY / ONCOLOGY

#### **ZAGE, PETER**

Provider ID: 206315  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3010 CHILDRENS WAY STE 2W  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035

🕒 After Hours Phone: (858) 966-5811  
Provider Gender: Male  
NPI: 1912003161  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC INFECTIOUS DISEASES

#### **MILDER, EDMUND**

Provider ID: 289138  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-7785  
Fax: (858) 966-8658  
🕒 After Hours Phone: (858) 966-7785  
Provider Gender: Male  
NPI: 1760460026  
🗣 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC NEPHROLOGY




#### **CARTER, CAITLIN**

Provider ID: 302777  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 8110 BIRMINGHAM WAY FL 1  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8052  
Fax: (858) 966-7789  
🕒 After Hours Phone: (858) 966-8052  
Provider Gender: Female  
NPI: 1255514618  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS

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## D. 专家名录

MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **PEDIATRIC NEPHROLOGY**





#### **INGULLI, ELIZABETH**




Provider ID: 302778  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 8110 BIRMINGHAM WAY  
STE 28  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8052  
Fax: (858) 966-7789  
 After Hours Phone: (858)  
966-8052  
Provider Gender: Female  
NPI: 1811919244  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,

SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **PEDIATRIC NEPHROLOGY**

#### **MAK, ROBERT**

Provider ID: 302776  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 8110 BIRMINGHAM WAY FL  
1  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8052  
Fax: (858) 966-7789  
 After Hours Phone: (858)  
966-8052  
Provider Gender: Male  
NPI: 1740295252  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **PEDIATRIC NEPHROLOGY**

#### **PERENS, ELLIOT**

Provider ID: 302765  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 8110 BIRMINGHAM WAY FL  
1  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8052  
Fax: (858) 966-7789  
 After Hours Phone: (858)  
966-8052  
Provider Gender: Male  
NPI: 1922328947  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND, MEDICAL CTR AT  
UCSF, SHARP MEMORIAL  
HOSPITAL, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
Website: N/A  
IPA: Rady Childrens Health Network

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **AKONG, KATHRYN**

Provider ID: 205673

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 2  
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1912169061

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **BHATTACHARJEE, RAKESH**

Provider ID: 246060

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 576-1700

After Hours Phone: (858) 576-1700

Provider Gender: Male

NPI: 1588781173

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **BHATTACHARJEE, RAKESH**

Provider ID: 205950

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 NORTH  
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858) 966-5846

Provider Gender: Male

NPI: 1588781173

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **CERNELC-KOHAN, MATEJKA**

Provider ID: 243042

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

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## D. 专家名录

☎ After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1871752451

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

### PEDIATRIC PULMONOLOGY

#### **CERNELC-KOHAN, MATEJKA**

Provider ID: 243041

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3030 CHILDRENS WAY FL

2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-5846

Fax: (858) 966-8457

☎ After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1871752451

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

### PEDIATRIC PULMONOLOGY

#### **FINCH, CHRISTINA**

Provider ID: 302581

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3030 CHILDRENS WAY FL

2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-5846

Fax: (858) 966-8457

☎ After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1598255325

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

### PEDIATRIC PULMONOLOGY

#### **FIREIZEN, YARON**

Provider ID: 302329

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3030 CHILDRENS WAY FL

2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-5846

Fax: (858) 966-8457

☎ After Hours Phone: (858) 966-5846

Provider Gender: Male

NPI: 1699123927

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

---


### **PEDIATRIC PULMONOLOGY**

#### **LANDEO GUTIERREZ, JEREMY**

*Provider ID: 284176*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5846*

*Fax: (858) 569-9052*

 *After Hours Phone: (858)  
966-5846*

*Provider Gender: Male*

*NPI: 1255750360*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

---

### **PEDIATRIC PULMONOLOGY**


#### **LANDEO GUTIERREZ, JEREMY**

*Provider ID: 284177*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

 *Phone: (858) 966-5846*

*Fax: (858) 966-8457*

 *After Hours Phone: (858)  
966-5846*

*Provider Gender: Male*

*NPI: 1255750360*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*


*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

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### **PEDIATRIC PULMONOLOGY**

#### **LENHART-PENDERGRASS, PATRICIA**


*Provider ID: 294641*

*Board Certified Specialty: Yes*


*RADY CHILDRENS HEALTH  
NETWORK*

 3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

 *Phone: (858) 966-5846*

*Fax: (858) 966-8457*

 *After Hours Phone: (858)  
966-5846*

*Provider Gender: Female*

*NPI: 1144615659*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F  
8:30AM-4:30PM*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

---


### **PEDIATRIC PULMONOLOGY**

#### **RAO, APARNA**

*Provider ID: 206123*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5846*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Fax: (858) 569-9052

☎ After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1649222340

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **RAO, APARNA**

Provider ID: 206124

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5846

Fax: (858) 966-5847

☎ After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1649222340

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **RYU, JULIE**

Provider ID: 206218

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY FL 2 NORTH  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5846

Fax: (858) 569-5847

☎ After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1568533321

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **TANTISIRA, KELAN**

Provider ID: 277183

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5846

Fax: (858) 569-9052

☎ After Hours Phone: (858) 966-5846

Provider Gender: Male

NPI: 1760420434

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO




Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

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## D. 专家名录




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

---


### **PEDIATRIC RHEUMATOLOGY**

#### **CHANG, JOHANNA**

*Provider ID: 246394*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3030 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8082*  
 *After Hours Phone: (858) 966-8082*



*Provider Gender: Female*  
*NPI: 1821242199*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: Rady Childrens Health Network*


---

### **PEDIATRIC RHEUMATOLOGY**

#### **SHEETS, ROBERT**



*Provider ID: 255900*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 *Phone: (858) 966-8082*  
*Fax: (858) 966-4067*

 *After Hours Phone: (858) 966-8082*

*Provider Gender: Male*  
*NPI: 1013088772*



 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-4:30PM*  
 *Website: N/A*

*IPA: Rady Childrens Health Network*


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### **PEDIATRICS**

#### **ALAGIRI, MADHU**

*Provider ID: 206387*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 *Phone: (858) 966-7484*  
*Fax: (858) 966-4064*

 *After Hours Phone: (858) 966-7484*

*Provider Gender: Male*  
*NPI: 1619083961*



 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: Rady Childrens Health Network*


---

### **PEDIATRICS**

#### **ALLSUP, VICTORIA**

*Provider ID: 302345*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*  
*Fax: (858) 633-4680*

 *After Hours Phone: (858) 810-8700*

*Provider Gender: Female*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1437786944

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRICS


#### ALLSUP, VICTORIA

Provider ID: 302344

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1437786944

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRICS


#### ANDREE, GREGOR

Provider ID: 293220

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Male

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRICS

#### ANDREE, GREGOR


Provider ID: 293219

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058


Fax: (858) 633-4682

 After Hours Phone: (619)  
280-2058

Provider Gender: Male

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRICS

#### BEAUCHAMP-WALTERS,

#### JULIA


Provider ID: 270063

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)  
966-5841

Provider Gender: Female

NPI: 1457420713

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRICS


#### **CAMERON, MELISSA**

Provider ID: 205965

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5841  
Fax: (858) 966-6728

 After Hours Phone: (858)  
966-5841

Provider Gender: Female

NPI: 1902983752

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network



### PEDIATRICS

#### **CANTU, ALICIA**

Provider ID: 205752

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1922179688

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


### PEDIATRICS

#### **CANTU, ALICIA**

Provider ID: 205753

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY STE  
300  
SAN DIEGO, CA 92123

 Phone: (858) 966-8974  
Fax: (858) 966-6721

 After Hours Phone: (858)  
966-8974

Provider Gender: Female

NPI: 1922179688

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRICS

#### **CHONG, AMY**

Provider ID: 259993

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5803

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## D. 专家名录

Fax: (858) 966-5992

☎ After Hours Phone: (858) 966-5803

Provider Gender: Female

NPI: 1720423288

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRICS

**DOAN STEPHENS, CRYSTAL**

Provider ID: 293274

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

Fax: (858) 633-4682

☎ After Hours Phone: (619) 280-2058

Provider Gender: Female

NPI: 1730570144

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRICS

**DOAN STEPHENS, CRYSTAL**

Provider ID: 293275

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1730570144

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRICS

**DOSHI, AMI**

Provider ID: 205329

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5841

Fax: (858) 966-6728

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1801099676

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRICS

**DOSHI, AMI**

Provider ID: 205330

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY STE 300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8974  
Fax: (858) 966-6721  
🕒 After Hours Phone: (858) 966-8974  
Provider Gender: Female  
NPI: 1801099676  
🗉 Provider English Spoken: Y  
🗉 Provider Language(s)  
Spoken: Gujarati, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRICS

#### **GIBONEY, JENNIFER**

Provider ID: 296241  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
☎ Phone: (619) 280-2058  
Fax: (858) 633-4682  
🕒 After Hours Phone: (619)

280-2058  
Provider Gender: Female  
NPI: 1275895849  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-2PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### PEDIATRICS

#### **GIBONEY, JENNIFER**

Provider ID: 296242  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
☎ Phone: (858) 810-8700  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858)  
810-8700  
Provider Gender: Female  
NPI: 1275895849  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M 8:30AM-5:30PM  
TU 5:30PM-8:30PM  
W 8:30AM-5:30PM  
TH 5:30PM-8:30PM  
F 8:30AM-5:30PM  
SA 9AM-4PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### PEDIATRICS

#### **GRAY, SARAH**

Provider ID: 284224  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5841  
Fax: (858) 966-6728  
🕒 After Hours Phone: (858)  
966-5841  
Provider Gender: Female  
NPI: 1508210311  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRICS


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**HUANG, MARIA**


Provider ID: 205974

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)  
966-5841

Provider Gender: Female

NPI: 1770841140

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRICS


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**JIMENEZ BACARDI, ADRIA**


Provider ID: 294640

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)  
966-5841

Provider Gender: Male

NPI: 1467847293

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: ST MARYS  
HOSPITAL AND MEDICAL  
CENTER, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

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### PEDIATRICS

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**JINDAL, ANUJA**

Provider ID: 303285

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123


 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)  
966-5819

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRICS

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**KARMAKAR, KANKA**

Provider ID: 213847

Board Certified Specialty: No

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)  
200-2426

Provider Gender: Female

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)  
Spoken: Bengali, Hindi,  
Polish, Spanish, Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

Website: N/A

IPA: Community Care IPA LLC

### PEDIATRICS

#### KHARE, MANASWITHA

Provider ID: 206289

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)  
966-5841

Provider Gender: Female

NPI: 1912345307

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRICS

#### LEE, BEGEM

Provider ID: 205923

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)  
966-5841

Provider Gender: Female

NPI: 1053672444

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF

### BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRICS

#### LOPEZ, XIMENA

Provider ID: 302856

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)  
966-4032

Provider Gender: Female

NPI: 1740316405

Provider English Spoken: Y  
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


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## D. 专家名录

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

**IPA: Rady Childrens Health Network**

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### **PEDIATRICS**


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#### **MANNINO AVILA, ELIZABETH**

**Provider ID: 262161**

**Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK**

 **3020 CHILDRENS WAY  
SAN DIEGO, CA 92123**

 **Phone: (858) 966-5841**

**Fax: (858) 966-6728**

 **After Hours Phone: (858)  
966-5841**

**Provider Gender: Female**

**NPI: 1164747127**

 **Provider English Spoken: Y  
Cultural Competency: N**

**Hospital Affiliation: UCSF**

**BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO**


**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\19**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT  
PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

**IPA: Rady Childrens Health  
Network**

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### **PEDIATRICS**


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#### **MARANO, RACHEL**

**Provider ID: 302438**

**Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK**

 **3020 CHILDRENS WAY  
SAN DIEGO, CA 92123**

 **Phone: (858) 966-5841**

**Fax: (858) 966-6728**

 **After Hours Phone: (858)  
966-5841**

**Provider Gender: Female**

**NPI: 1043673528**

 **Provider English Spoken: Y  
Cultural Competency: N**

**Hospital Affiliation:**

**HOLLYWOOD PRESBYTERIAN  
MED CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO**


**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\19**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT  
PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

**IPA: Rady Childrens Health  
Network**

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### **PEDIATRICS**


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#### **MARC-AURELE, KRISHELLE**

**Provider ID: 301719**

**Board Certified Specialty: No  
UCSD MEDICAL GROUP**

 **7910 FROST ST STE 230  
SAN DIEGO, CA 92123**

 **Phone: (800) 926-8273**

**Fax: (888) 539-8781**

 **After Hours Phone: (800)  
926-8273**

**Provider Gender: Female**

**NPI: 1952503435**

 **Provider English Spoken: Y  
Cultural Competency: N**

**Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,**

**UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY**

**MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL**

**Medi-Cal Open Panel: Yes**

**Min/Max Age: 0\18**

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT  
PROVIDER**

 **Website: N/A**

**IPA: Rady Childrens Health  
Network, UCSD Medical Group**

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### **PEDIATRICS**

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#### **NGO, MAI**

**Provider ID: 302113**

**Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK**

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## D. 专家名录








 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-8974  
 Fax: (858) 966-4051  
 After Hours Phone: (858)  
 966-8974  
 Provider Gender: Female  
 NPI: 1508910787  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Hospital Affiliation: UCSF  
 BENIOFF CHILDREN'S  
 HOSPITAL OAKLAND,  
 MEDICAL CTR AT UCSF, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network

### **PEDIATRICS**

#### **NGO, MAI**

Provider ID: 302114  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK



 7910 FROST ST STE 195  
 SAN DIEGO, CA 92123






 Phone: (858) 966-8974  
 Fax: (858) 966-6721  
 After Hours Phone: (858)  
 966-8974  
 Provider Gender: Female  
 NPI: 1508910787  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Hospital Affiliation: UCSF  
 BENIOFF CHILDREN'S  
 HOSPITAL OAKLAND,  
 MEDICAL CTR AT UCSF, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network

### **PEDIATRICS**

#### **PATEL, AARTI**

Provider ID: 205865  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK



 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-5841  
 Fax: (858) 966-6728

 After Hours Phone: (858)  
 966-5841  
 Provider Gender: Female  
 NPI: 1871813105  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network


### **PEDIATRICS**

#### **PIERCE, HEATHER**

Provider ID: 205701  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123  
 Phone: (858) 966-5841  
 Fax: (858) 966-6728

 After Hours Phone: (858)  
 966-5841  
 Provider Gender: Female  
 NPI: 1699955542

 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY

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## D. 专家名录

### CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

#### PEDIATRICS


### POLICH, MICHELLE


Provider ID: 286390

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1780118018

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


#### PEDIATRICS


### RHEE, KYUNG

Provider ID: 206114


Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1013996529

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

#### PEDIATRICS


### RIES, DAVID


Provider ID: 206082

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858) 966-5841

Provider Gender: Male

NPI: 1376705483

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

#### PEDIATRICS

### RUNGVIVATJARUS, TIRANUN

Provider ID: 206319

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY

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## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5841  
Fax: (858) 966-6728  
🕒 After Hours Phone: (858) 966-5841  
Provider Gender: Female  
NPI: 1407276363  
🗺 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

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### PEDIATRICS

**SONG, RICHARD**  
Provider ID: 301716  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 7910 FROST ST STE 230  
SAN DIEGO, CA 92123  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1881893477  
🗺 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Rady Childrens Health Network, UCSD Medical Group

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### PEDIATRICS

**STOVER, LAURIE**  
Provider ID: 206196  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5841  
🕒 After Hours Phone: (858) 966-5841

Provider Gender: Female  
NPI: 1659442317  
🗺 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

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### PEDIATRICS

**SUTTNER, DENISE**  
Provider ID: 301721  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 7910 FROST ST STE 230  
SAN DIEGO, CA 92123  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1457433799  
🗺 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

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### PEDIATRICS


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#### VEGA, SARAH


Provider ID: 297077

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123


 Phone: (858) 576-1700

Fax: (858) 966-6728

 After Hours Phone: (858)  
576-1700

Provider Gender: Female

NPI: 1154716199

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRICS

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#### VEGA, SARAH

Provider ID: 297078

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3665 KEARNY VILLA RD  
STE 500

SAN DIEGO, CA 92123

 Phone: (858) 966-5980


Fax: (858) 966-5992

 After Hours Phone: (858)  
966-5980

Provider Gender: Female

NPI: 1154716199

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRICS

---

#### WEISS, KATHERINE

Provider ID: 301703

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 7910 FROST ST STE 230  
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO



Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录




 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*




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### PHYSICAL MEDICINE / REHABILITATION

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**ALGRA, JEFFREY**  
*Provider ID: 287524*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 7910 FROST ST STE 195  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8974*  
 *After Hours Phone: (858) 966-8974*  
*Provider Gender: Male*  
*NPI: 1457664518*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### PHYSICAL MEDICINE /








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### REHABILITATION

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**BIFFL, SUSAN**  
*Provider ID: 287453*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 7910 FROST ST STE 195  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8974*  
*Fax: (858) 966-6721*  
 *After Hours Phone: (858) 966-8974*  
*Provider Gender: Female*  
*NPI: 1366589640*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### PHYSICAL MEDICINE / REHABILITATION








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**DALAL, PRITHA**  
*Provider ID: 287523*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH*

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### NETWORK

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 7910 FROST ST STE 195  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8974*  
 *After Hours Phone: (858) 966-8974*  
*Provider Gender: Female*  
*NPI: 1609017532*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### PHYSICAL MEDICINE / REHABILITATION

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**RICHARDSON, HENRY**  
*Provider ID: 295276*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110  
 *Phone: (619) 325-1161*  
*Fax: (619) 325-1717*  
 *After Hours Phone: (619)*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

325-1161

Provider Gender: Male

NPI: 1407052459


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### PHYSICAL MEDICINE / REHABILITATION


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#### **RYAN, KYLE**

Provider ID: 287520

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 195  
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)  
966-8974

Provider Gender: Male

NPI: 1447645742


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PHYSICAL MEDICINE / REHABILITATION


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#### **SCOTT-WYARD, PHOEBE**

Provider ID: 287519

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7910 FROST ST STE 195  
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)  
966-8974

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
CHILDRENS HOSP OF LOS  
ANGELES, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PHYSICAL MEDICINE / REHABILITATION


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#### **SKALSKY, ANDREW**

Provider ID: 287537

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 7910 FROST ST STE 195  
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)  
966-8974

Provider Gender: Male

NPI: 1487635272


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### PHYSICIANS ASSISTANT

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#### **AINSWORTH, DELISSA**

Provider ID: 243367

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750734893

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
UCSD MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **ALBRIGHT, KELSEY**

Provider ID: 284763

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 923-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
923-8273

Provider Gender: Female

NPI: 1235653148

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **ARMEEN, GARY**

Provider ID: 247035

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1760774863

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **BERGEN, SOPHEA**

Provider ID: 295518

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6719 ALVARADO RD STE  
308

SAN DIEGO, CA 92120

Phone: (619) 265-7912

Fax: (619) 265-7922

After Hours Phone: (619)  
265-7912

Provider Gender: Female

NPI: 1558300665

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ALVARADO  
HOSPITAL LLC, PALOMAR

MEDICAL CENTER, SCRIPPS  
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,  
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

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## D. 专家名录

American Sign Language (ASL): Provider ID: 255558

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PHYSICIANS ASSISTANT**


#### **BOYD, LISA**

Provider ID: 217649

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **PHYSICIANS ASSISTANT**


#### **BRUECKNER, TAMMIE**

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**


#### **CASTILLO, PATRICIA**


Provider ID: 257530

Board Certified Specialty: No  
BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

Provider Gender: Female

NPI: 1376550657

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH  
8:30AM-5:30PM

 F 8:30AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

---


### **PHYSICIANS ASSISTANT**


#### **DERISSI, DANA**

Provider ID: 301632

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1063829505

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR,

RADY CHILDRENS HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): No

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

### PHYSICIANS ASSISTANT


#### GUTH, CARA

Provider ID: 299111

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 9333 GENESEE AVE STE 350

SAN DIEGO, CA 92121

 Phone: (858) 455-6460

Fax: (858) 455-5362

 After Hours Phone: (858) 455-6460

Provider Gender: Female


NPI: 1992177182


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL): No

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### PHYSICIANS ASSISTANT


#### HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): No

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### PHYSICIANS ASSISTANT

#### HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): No

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 203 W F ST  
SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

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## D. 专家名录


JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


---


HUNTER, JACOB


Provider ID: 298430

Board Certified Specialty: No

UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### PHYSICIANS ASSISTANT

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HUNTER, JACOB


Provider ID: 298428

Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

---


HUNTER, JACOB


Provider ID: 287449

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### PHYSICIANS ASSISTANT

---

KIVIAT, ANNETTE


Provider ID: 302452


Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

 Fax: (858) 560-6798

 After Hours Phone: (858)  
966-4003

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19


American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

---

### **PHYSICIANS ASSISTANT**

---


#### **LAM, DAVINA**

*Provider ID: 295651*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 6719 ALVARADO RD STE 308

SAN DIEGO, CA 92120

 *Phone: (619) 265-7912*

*Fax: (619) 265-7922*

 *After Hours Phone: (619) 265-7912*

*Provider Gender: Female*

*NPI: 1245863737*

 *Provider English Spoken: Y Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL,*

*ALVARADO HOSP MED CTR, GROSSMONT HOSPITAL,*

*SHARP MEMORIAL HOSPITAL*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

---

### **PHYSICIANS ASSISTANT**

---


#### **LAMBERT, GAGE**


*Provider ID: 214788*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 200 W ARBOR DR

SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1144672494*

 *Provider English Spoken: Y Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL,*

*SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **PHYSICIANS ASSISTANT**

---

#### **LINDEMANN, CHRISTINA**

*Provider ID: 283760*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

*Fax: (858) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1194373514*


 *Provider English Spoken: Y Cultural Competency: N*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **PHYSICIANS ASSISTANT**

---

#### **MARTIN, HALEY**


*Provider ID: 305026*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 200 W ARBOR DR

SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1093440836*

 *Provider English Spoken: Y*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


---

#### MCADAMS, JOSEPH

Provider ID: 280611

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1104371251

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT


---


#### MERRILL, COREY

Provider ID: 258040

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1386032308


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### PHYSICIANS ASSISTANT


---

#### NAKAMITSU, ABIGAIL

Provider ID: 268666

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
3  
SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)  
966-6789

Provider Gender: Female

NPI: 1932459179

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

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### PHYSICIANS ASSISTANT


---

#### PAUL, ROBERT

Provider ID: 307945

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5395 RUFFIN RD STE 204  
SAN DIEGO, CA 92123

 Phone: (858) 571-3630

Fax: (858) 295-3948

 After Hours Phone: (858)  
571-3630

Provider Gender: Male

NPI: 1972811412

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### PELIO, DARREN

Provider ID: 293441

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8275

Fax: (888) 539-8783

 After Hours Phone: (800)  
926-8275

Provider Gender: Male

NPI: 1386791028

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT


#### PELIO, DARREN

Provider ID: 293444


Board Certified Specialty: No

UCSD MEDICAL GROUP

 3900 5TH AVE STE 110  
SAN DIEGO, CA 92103

 Phone: (800) 926-8278

Fax: (888) 539-8786

 After Hours Phone: (800)  
926-8278

Provider Gender: Male

NPI: 1386791028


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT


#### PERREAULT, MARK


Provider ID: 283586

Board Certified Specialty: No

UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1356749451

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### PERREAULT, MARK


Provider ID: 283585

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1356749451

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### PHUNG, AIVI

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## D. 专家名录

Provider ID: 293246  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700  
Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Provider Gender: Female  
NPI: 1639528110

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### PHUNG, AIVI

Provider ID: 293247  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925  
Fax: (858) 633-4680

After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1639528110

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### PRIEST, VIVIAN

Provider ID: 272430

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1225581754

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### PYLE, ALEXANDRA

Provider ID: 297718

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

9333 GENESEE AVE STE  
350  
SAN DIEGO, CA 92121

Phone: (858) 455-6460  
Fax: (858) 455-7197

After Hours Phone: (858)  
455-6460

Provider Gender: Female

NPI: 1225416472

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 20\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### QUIJANO, GLENN


Provider ID: 307067

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 5395 RUFFIN RD STE 204  
SAN DIEGO, CA 92123

 Phone: (858) 571-3630

Fax: (858) 295-3948

 After Hours Phone: (858)  
571-3630

Provider Gender: Male

NPI: 1407466030


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PHYSICIANS ASSISTANT**


#### **ROBERTS, AUDREY**

Provider ID: 253253

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (619) 543-7777

 After Hours Phone: (619)  
543-7777

Provider Gender: Female

NPI: 1265960256

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Network  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**


#### **SCHMITT, EVA**

Provider ID: 264176

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1174715106

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: German

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

### **PHYSICIANS ASSISTANT**

#### **SCHROEDER, JENNIFER**

Provider ID: 256639

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (858) 453-1469

 After Hours Phone: (800)  
926-8273

Provider Gender: Female


NPI: 1780851253


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**


#### **SCHROEDER, JENNIFER**

Provider ID: 256640

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female

NPI: 1780851253

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **SCHULZ, STEFAN**

Provider ID: 243419

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1316102163


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **SHAUL, SHERA**


Provider ID: 247974

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 111  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1336659507

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **SPEH, BRIAN**


Provider ID: 305009

Board Certified Specialty: No

UCSD MEDICAL GROUP


 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124593926

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT


#### **STALLINGS, ANDREA**


Provider ID: 255913

Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (619) 543-7496

 After Hours Phone: (619)  
543-7496

Provider Gender: Female

NPI: 1972595478


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

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## D. 专家名录

---


### **TESFAI, HELEN**

Provider ID: 287372

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1942724042

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**


#### **WAHLIN, TAMARA**

Provider ID: 299599

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**


#### **WAHLIN, TAMARA**

Provider ID: 299600

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**


#### **WAHLIN, TAMARA**

Provider ID: 299598

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**


#### **WEBB, SHANNON**

Provider ID: 305285

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6605 NANCY RIDGE DR

SAN DIEGO, CA 92121

 Phone: (858) 750-2983

Fax: (858) 750-2984

 After Hours Phone: (858)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

750-2983  
Provider Gender: Female  
NPI: 1821271685  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **WEIR, JACQUELINE**

Provider ID: 278203  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9909 MIRA MESA BLVD  
STE 200  
SAN DIEGO, CA 92131  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1932494499  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **WEIR, JACQUELINE**

Provider ID: 278201  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 925-8271  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
925-8271  
Provider Gender: Female  
NPI: 1932494499  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **WEIR, JACQUELINE**

Provider ID: 278200  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1932494499

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **WRIGHT, DEREK**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 302388

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)  
325-1161

Provider Gender: Male

NPI: 1629674858

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): UCSD Medical Group

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 293289

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD Medical Group

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 293290

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 303060

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

---

### **PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER**


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#### **SIETSMA, ALEXANDRA**

*Provider ID: 276908*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 350 DICKINSON ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1932522778*

 *Provider English Spoken: Y Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **PSYCHIATRIC-MENTAL**

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### **HEALTH NURSE PRACTITIONER**


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#### **SIETSMA, ALEXANDRA**

*Provider ID: 276909*

*Board Certified Specialty: No UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1932522778*

 *Provider English Spoken: Y Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **PSYCHOLOGIST**


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#### **ABERCROMBIE, SHERI**

*Provider ID: 290770*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*


 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 810-8787*  
*Fax: (858) 987-5825*

 *After Hours Phone: (858) 810-8787*

*Provider Gender: Female*

*NPI: 1932292422*

 *Provider English Spoken: Y Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

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### **PSYCHOLOGIST**


---

#### **ABERCROMBIE, SHERI**

*Provider ID: 293400*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

*Fax: (858) 633-4680*

 *After Hours Phone: (858) 279-0925*

*Provider Gender: Female*

*NPI: 1932292422*

 *Provider English Spoken: Y Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-4PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **PSYCHOLOGIST**

---

**BANKS, SARAH**  
Provider ID: 203173  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1164701132  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
🦽 Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **PSYCHOLOGIST**

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**BANKS, SARAH**

Provider ID: 203174  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4510 EXECUTIVE DR STE  
325  
SAN DIEGO, CA 92121  
📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1164701132  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
🦽 Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **PSYCHOLOGIST**

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**BANKS, SARAH**  
Provider ID: 304195  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)

926-8273  
Provider Gender: Female  
NPI: 1164701132  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
🦽 Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **PSYCHOLOGIST**

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**BASS, GURGIANA**  
Provider ID: 306550  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
📞 Phone: (858) 279-0925  
🕒 After Hours Phone: (858)  
279-0925  
Provider Gender: Male  
NPI: 1639325277  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 8AM-4:30PM  
TU 8AM-0PM  
W 8AM-4:30PM  
TH 8AM-0PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*


### PSYCHOLOGIST

#### **BASS, GURGIANA**



*Provider ID: 290752*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 *Phone: (858) 810-8787*  
*Fax: (858) 987-5825*  
 *After Hours Phone: (858)  
810-8787*

*Provider Gender: Male*  
*NPI: 1639325277*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*


### PSYCHOLOGIST

#### **CHESHER, NICHOLAS**

*Provider ID: 273811*  
*Board Certified Specialty: No*

#### **UCSD MEDICAL GROUP**


 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1124539697*


 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


*IPA: UCSD Medical Group*

### PSYCHOLOGIST

#### **CLEMENT, LUIS**

*Provider ID: 290745*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*


 2630 1ST AVE  
SAN DIEGO, CA 92103

 *Phone: (619) 234-2158*  
*Fax: (619) 234-0505*

 *After Hours Phone: (619)  
234-2158*

*Provider Gender: Male*

*NPI: 1235364712*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*



 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### PSYCHOLOGIST



#### **DEL AGUILA, FABIOLA**

*Provider ID: 290302*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 1016 OUTER RD  
SAN DIEGO, CA 92154  
 *Phone: (619) 429-3733*  
*Fax: (619) 628-5550*

 *After Hours Phone: (619)  
429-3733*

*Provider Gender: Female*  
*NPI: 1720283211*

 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

<hr/> <p style="text-align: center;"><b>PSYCHOLOGIST</b></p> <hr/> <p><b>DIOKNO, RHODA</b> Provider ID: 290800 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 2630 1ST AVE SAN DIEGO, CA 92103 ☎ Phone: (619) 234-2158 Fax: (619) 234-0505 🕒 After Hours Phone: (619) 234-2158 Provider Gender: Female NPI: 1629109483 📄 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: IHP of Southern Cal-PHP</p> <hr/>	<p>NPI: 1114687803 📄 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: IHP of Southern Cal-PHP</p> <hr/>	<p><b>FORZANI, CHRISTINA</b> Provider ID: 290780 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 4290 POLK AVE SAN DIEGO, CA 92105 ☎ Phone: (619) 961-1497 Fax: (858) 633-4682 🕒 After Hours Phone: (619) 961-1497 Provider Gender: Female NPI: 1902939630 📄 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: IHP of Southern Cal-PHP</p> <hr/>
<hr/> <p style="text-align: center;"><b>PSYCHOLOGIST</b></p> <hr/> <p><b>FIRESTONE, MICHELLE</b> Provider ID: 290954 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 6973 LINDA VISTA RD SAN DIEGO, CA 92111 ☎ Phone: (858) 279-0925 Fax: (858) 633-4680 🕒 After Hours Phone: (858) 279-0925 Provider Gender: Female</p> <hr/>	<p>NPI: 1114687803 📄 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: IHP of Southern Cal-PHP</p> <hr/>	<hr/> <p style="text-align: center;"><b>PSYCHOLOGIST</b></p> <hr/> <p><b>GIAMONA, KRISTEN</b> Provider ID: 294171 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 📍 6973 LINDA VISTA RD SAN DIEGO, CA 92111 ☎ Phone: (858) 279-0925 Fax: (858) 633-4680 🕒 After Hours Phone: (858) 279-0925 Provider Gender: Female NPI: 1376824383 📄 Provider English Spoken: Y</p> <hr/>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


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### PSYCHOLOGIST

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**GIAMONA, KRISTEN**  
Provider ID: 290801  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8787  
Fax: (858) 987-5825  
 After Hours Phone: (858)  
810-8787

Provider Gender: Female  
NPI: 1376824383

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST

---

**GOMEZ, JUANITA**  
Provider ID: 291424

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6030 VILLAGE WAY  
SAN DIEGO, CA 92130  
 Phone: (800) 926-8372  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8372

Provider Gender: Female  
NPI: 1790915759




 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

IPA: UCSD Medical Group


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### PSYCHOLOGIST

---

**KLUEMPER, NICOLE**  
Provider ID: 296237  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
279-0925

Provider Gender: Female  
NPI: 1902125818




 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP



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### PSYCHOLOGIST

---

**KLUEMPER, NICOLE**  
Provider ID: 290792  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 279-0377  
 After Hours Phone: (858)  
810-8700

Provider Gender: Female  
NPI: 1902125818

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### PSYCHOLOGIST

---

**LABIB, MICHAEL**  
Provider ID: 301617  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

1666 PRECISION PARK LN  
SAN DIEGO, CA 92173  
Phone: (619) 662-4100  
Fax: (619) 785-3384  
After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1609055797

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

#### LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245225

Board Certified Specialty: No  
UCSD MEDICAL GROUP

7910 FROST ST STE 350  
SAN DIEGO, CA 92123

Phone: (858) 496-4800

After Hours Phone: (858)  
496-4800

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245224

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### LINKE, SARAH

Provider ID: 273638

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PSYCHOLOGIST

#### LINKE, SARAH

Provider ID: 273639

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4910 DIRECTORS PL STE  
250  
SAN DIEGO, CA 92121

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1487026415

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### MAGINOT-CHESHER, TAMARA

Provider ID: 273223

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

Phone: (858) 534-8019  
Fax: (858) 534-6727

After Hours Phone: (858)  
534-8019

Provider Gender: Female  
NPI: 1043441165

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### MCCULLUM, TIFFANY

Provider ID: 290689

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

286 EUCLID AVE STE 302  
SAN DIEGO, CA 92114

Phone: (619) 662-4100  
Fax: (619) 205-1949

After Hours Phone: (619)  
662-4100

Provider Gender: Female  
NPI: 1528306206

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

#### MONTOYA, JESSICA

Provider ID: 274619

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST FL 3  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1003421256

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### **PSYCHOLOGIST**

**NING, GRACE**  
Provider ID: 296219  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
📞 Phone: (858) 279-0925  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858) 279-0925  
Provider Gender: Female  
NPI: 1598911315  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Chinese, Mandarin  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **PSYCHOLOGIST**

**NING, GRACE**  
Provider ID: 290742  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 7011 LINDA VISTA RD

SAN DIEGO, CA 92111  
📞 Phone: (858) 810-8700  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858) 810-8700  
Provider Gender: Female  
NPI: 1598911315  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Chinese, Mandarin  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **PSYCHOLOGIST**

**NORMAN, MARC**  
Provider ID: 272916  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
📞 Phone: (619) 543-2827  
🕒 After Hours Phone: (619) 543-2827  
Provider Gender: Male  
NPI: 1922169101  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

**THORNTON**  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

---

### **PSYCHOLOGIST**

**NORMAN, MARC**  
Provider ID: 276869  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 350 DICKINSON ST  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1922169101  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


#### **ORFF, HENRY**


Provider ID: 273009

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE  
P2

SAN DIEGO, CA 92121

 Phone: (844) 757-5337

 After Hours Phone: (844)  
757-5337

Provider Gender: Male

NPI: 1144685215


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


#### **ORTIZ, MARIA**

Provider ID: 290721

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE

SAN DIEGO, CA 92114


 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1497980775

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST

---

#### **PATTERSON-HYATT,**


#### **KIMBERLY**

Provider ID: 290730

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD

SAN DIEGO, CA 92115


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1780997742

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST

---


#### **PRINCE, RENEE**

Provider ID: 303603


Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844)  
200-2426

Provider Gender: Female


NPI: 1467737908


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM

 Website: N/A

IPA: Community Care IPA LLC

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### PSYCHOLOGIST

---

#### **RADOJEVIC, NATASHA**

Provider ID: 306574

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
279-0925  
Provider Gender: Female  
NPI: 1821365008  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU  
8:30AM-5:30PM  
TH-F 8:30AM-5:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




### PSYCHOLOGIST

**RADOJEVIC, NATASHA**  
Provider ID: 290690  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
810-8700  
Provider Gender: Female  
NPI: 1821365008  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes








Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU  
8:30AM-5:30PM  
TH-F 8:30AM-5:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

**SALO, STEPHANIE**  
Provider ID: 307831  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 563-0250  
Fax: (858) 633-4681  
 After Hours Phone: (619)  
563-0250  
Provider Gender: Female  
NPI: 1477967784  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 17\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

**SCHELLINGER, KRISTON**  
Provider ID: 213752  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (858) 246-1979  
 After Hours Phone: (858)  
246-1979  
Provider Gender: Female  
NPI: 1710234273  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### PSYCHOLOGIST

**SCHELLINGER, KRISTON**  
Provider ID: 213750  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9333 GENESEE AVE STE  
200  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1710234273

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **PSYCHOLOGIST**

---

#### **SCHELLINGER, KRISTON**

Provider ID: 213751

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9909 MIRA MESA BLVD  
STE 200  
SAN DIEGO, CA 92131

☎ Phone: (858) 246-1979

☎ After Hours Phone: (858)  
246-1979

Provider Gender: Female

NPI: 1710234273

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **PSYCHOLOGIST**

---

#### **TARLE, STEPHANIE**

Provider ID: 303115

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1659920403

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **PSYCHOLOGIST**

---

#### **TO, TUAN**

Provider ID: 290283

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4290 POLK AVE  
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

Fax: (858) 633-4681

☎ After Hours Phone: (619)  
563-0250

Provider Gender: Male

NPI: 1255696183

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **PSYCHOLOGIST**

---

#### **TO, TUAN**

Provider ID: 290285

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858)  
279-0925

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1255696183

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST


#### **TO, TUAN**

Provider ID: 290284

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Male


NPI: 1255696183


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST


#### **TWAMLEY, ELIZABETH**

Provider ID: 290717

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)  
233-8500

Provider Gender: Female

NPI: 1700089141


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W 8:30AM-5PM  
TH 8:30AM-9PM  
F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### PUBLIC HEALTH

#### PREVENTATIVE MEDICINE


#### **SOZANSKI, JESSE**

Provider ID: 200925

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1437446622

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PULMONARY DISEASES

#### **BAILEY, JACOB**

Provider ID: 299924

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **PULMONARY DISEASES**

#### **BAILEY, JACOB**

*Provider ID: 299923*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1598150039*


 *Provider English Spoken: Y  
Cultural Competency: N*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **PULMONARY DISEASES**


#### **JOSHUA, JISHA**

*Provider ID: 238062*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*


 200 W ARBOR DR  
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1023436417*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Hindi, Malayalam*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **PULMONARY DISEASES**


#### **JOSHUA, JISHA**


*Provider ID: 238061*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4520 EXECUTIVE DR STE  
P2


SAN DIEGO, CA 92121


 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1023436417*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Hindi, Malayalam*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **PULMONARY DISEASES**


#### **LE, HUAN**

*Provider ID: 300636*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 5507 EL CAJON BLVD STE  
C

SAN DIEGO, CA 92115

 *Phone: (619) 582-1448*


*Fax: (619) 582-1081*

 *After Hours Phone: (619)  
582-1448*

*Provider Gender: Male*

*NPI: 1780797381*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: French, Spanish,  
Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


MERCY HOSPITAL CHULA  
VISTA, PARADISE VALLEY  
HOSPITAL, SHARP CHULA  
VISTA MED CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): Min/Max Age: 16\99

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W 9AM-5PM  
TH 8AM-1PM  
F 9AM-5PM  
SA 8AM-11AM

 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **PULMONARY DISEASES**

#### **LE, HUAN**

Provider ID: 27358

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC



 5507 EL CAJON BLVD STE  
C  
SAN DIEGO, CA 92115

 Phone: (619) 582-1448  
Fax: (619) 582-1081

 After Hours Phone: (619)  
582-1448

Provider Gender: Male

NPI: 1780797381

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, Spanish,  
Vietnamese  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PARADISE VALLEY  
HOSPITAL, SHARP CHULA  
VISTA MED CTR

Medi-Cal Open Panel: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W 9AM-5PM  
TH 8AM-1PM  
F 9AM-6PM  
SA 8AM-11AM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **PULMONARY DISEASES**


#### **MCGUIRE, WILLIAM**

Provider ID: 299986

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CORONADO HOSP AND

HEALTHCARE CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **PULMONARY DISEASES**

#### **PEARCE, ALEX**

Provider ID: 300055

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1265896856

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **RADIATION ONCOLOGY**

#### **CARMONA, RUBEN**

Provider ID: 303100

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

7901 FROST ST  
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (619) 740-8499

After Hours Phone: (858)  
939-5010

Provider Gender: Male

NPI: 1275929242

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp  
Grossmont Hospital, SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

#### **COLEMAN, LORI**

Provider ID: 221091

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

3075 HEALTH CENTER DR  
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)  
939-5010

Provider Gender: Female

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**

#### **HATTANGADI-GLUTH, JONA**

Provider ID: 262270

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

16918 DOVE CANYON RD  
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-5PM  
F 8AM-8PM

Website: N/A

IPA: Community Care IPA LLC,

Imperial Health Holdings

Medical Group-SD

### **RADIATION ONCOLOGY**

#### **HATTANGADI-GLUTH, JONA**

Provider ID: 254496

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD  
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)  
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

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## D. 专家名录

MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-TH 8AM-5PM F 8AM-8PM  
 🌐 Website: N/A  
 IPA: Community Care IPA LLC, Imperial Health Holdings  
 Medical Group-SD

### RADIATION ONCOLOGY

**HOOPES, DAVID**  
 Provider ID: 262206  
 Board Certified Specialty: No  
 IMPERIAL HEALTH HOLDINGS  
 MEDICAL GROUP-SD  
 📍 16918 DOVE CANYON RD STE 103  
 SAN DIEGO, CA 92127  
 📞 Phone: (858) 649-5100  
 Fax: (858) 649-5099  
 📞 After Hours Phone: (858) 649-5100  
 Provider Gender: Male  
 NPI: 1962520080  
 🗒 Provider English Spoken: Y  
 🗒 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-F 8:30AM-5PM  
 🌐 Website: N/A  
 IPA: Community Care IPA LLC, Imperial Health Holdings  
 Medical Group-SD

### RADIATION ONCOLOGY

**HOOPES, DAVID**  
 Provider ID: 269725  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 📍 16918 DOVE CANYON RD STE 103  
 SAN DIEGO, CA 92127  
 📞 Phone: (858) 649-5100  
 Fax: (858) 649-5099  
 📞 After Hours Phone: (858) 649-5100  
 Provider Gender: Male  
 NPI: 1962520080  
 🗒 Provider English Spoken: Y  
 🗒 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-F 8:30AM-5PM  
 🌐 Website: N/A  
 IPA: Community Care IPA LLC, Imperial Health Holdings  
 Medical Group-SD

### RADIATION ONCOLOGY

**MURPHY, JAMES**  
 Provider ID: 262401  
 Board Certified Specialty: No  
 IMPERIAL HEALTH HOLDINGS  
 MEDICAL GROUP-SD  
 📍 16918 DOVE CANYON RD STE 103  
 SAN DIEGO, CA 92127  
 📞 Phone: (559) 447-4949  
 Fax: (559) 447-4925  
 📞 After Hours Phone: (559) 447-4949  
 Provider Gender: Male  
 NPI: 1730382631  
 🗒 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 ♿ Accessibility: CONTACT PROVIDER  
 🌐 Website: N/A  
 IPA: Imperial Health Holdings  
 Medical Group-SD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

<hr/> <b>RADIATION ONCOLOGY</b> <hr/> <b>TRINGALE, KATHRYN</b> Provider ID: 306883 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 9730 SUMMERS RIDGE RD STE 101 SAN DIEGO, CA 92121 Phone: (858) 345-2445 Fax: (858) 578-1144 After Hours Phone: (858) 345-2445 Provider Gender: Female NPI: 1780172031 Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network	Fax: (858) 939-5021 After Hours Phone: (858) 939-5010 Provider Gender: Male NPI: 1225186232 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER Medi-Cal Open Panel: Yes Min/Max Age: 19\100 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC	Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 19\100 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC
<hr/> <b>RADIATION ONCOLOGY</b> <hr/> <b>VOLPP, PAUL</b> Provider ID: 221105 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3075 HEALTH CENTER DR SAN DIEGO, CA 92123 Phone: (858) 939-5010	<hr/> <b>RADIATION ONCOLOGY</b> <hr/> <b>WEINSTEIN, GEOFFREY</b> Provider ID: 220039 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3075 HEALTH CENTER DR SAN DIEGO, CA 92123 Phone: (858) 939-5010 Fax: (858) 939-5021 After Hours Phone: (858) 939-5010 Provider Gender: Male NPI: 1841233947	<hr/> <b>RADIOLOGY DIAGNOSTIC</b> <hr/> <b>BERMAN, ZACHARY</b> Provider ID: 304163 Board Certified Specialty: No UCSD MEDICAL GROUP 6655 ALVARADO RD SAN DIEGO, CA 92120 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1033521190 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **BERMAN, ZACHARY**

Provider ID: 269318


Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033521190

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**


#### **BRANCH, CODY**

Provider ID: 283675

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **RADIOLOGY DIAGNOSTIC**


#### **BRANCH, CODY**

Provider ID: 304199

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1851770622

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**


#### **CARSWELL, AIMEE**

Provider ID: 304194

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)  
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
EISENHOWER MEDICAL CTR  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **RADIOLOGY DIAGNOSTIC**

#### **CARSWELL, AIMEE**


Provider ID: 303055

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)  
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**


#### **CARSWELL, AIMEE**

Provider ID: 303054


Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)  
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **CHENG, KAREN**

Provider ID: 283228

Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **CHENG, KAREN**

Provider ID: 304207

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): **CHEWNING, RUSH**

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**

Provider ID: 283226

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


---

### **RADIOLOGY DIAGNOSTIC**

Provider ID: 301914

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 966-8863

Fax: (858) 966-8863

 After Hours Phone: (858)  
966-8863

Provider Gender: Male

NPI: 1083872212

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **RADIOLOGY DIAGNOSTIC**

**FAZELI, SOUDABEH**

Provider ID: 304171

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

**FAZELI, SOUDABEH**

Provider ID: 299992

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **FAZELI, SOUDABEH**

Provider ID: 299991  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1639553613

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **FORCIER, NANCY**

Provider ID: 286954  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female  
NPI: 1497721724

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,

Providence Mission Hospital  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **FORCIER, NANCY**

Provider ID: 286956  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1497721724

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,

Providence Mission Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **FOWLER, KATHRYN**

Provider ID: 201291  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1255457941

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,  
SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,  
SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **FOWLER, KATHRYN**

Provider ID: 201289

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,  
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,


SCRIPPS GREEN HOSPITAL,  
SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **GRISSOM, MURRAY**

Provider ID: 271567

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, Stanford Health  
Care, STANFORD HEALTH

CARE TRI-VALLEY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


### **RADIOLOGY DIAGNOSTIC**

#### **GRISSOM, MURRAY**

Provider ID: 271569

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, Stanford Health  
Care, STANFORD HEALTH

CARE TRI-VALLEY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

### **RADIOLOGY DIAGNOSTIC**

#### **HANNSUN, GEMMY**

Provider ID: 282791

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST STE 202  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1992120026

Provider English Spoken: Y

Provider Language(s)  
Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**HANNSUN, GEMMY**

Provider ID: 282789

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1992120026

Provider English Spoken: Y

Provider Language(s)  
Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**HORKY, LAURA**

Provider ID: 241853

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1598967812

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**JAFFRAY, PAUL**

Provider ID: 299957

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1275700999

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

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## D. 专家名录

### PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### **JAFFRAY, PAUL**

Provider ID: 304165  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Los  
Angeles General Medical  
Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC


#### **JAFFRAY, PAUL**

Provider ID: 299958

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Los  
Angeles General Medical  
Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### RADIOLOGY DIAGNOSTIC

#### **JAZBEH, SAMMER**

Provider ID: 271127

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, PROVIDENCE

LITTLE CO OF MARY MED CTR

TORRANCE, PROVIDENCE

LITTLE CO OF MARY MED CTR


SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### RADIOLOGY DIAGNOSTIC

#### **JAZBEH, SAMMER**

Provider ID: 304167

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic



Cultural Competency: N

Hospital Affiliation: UCSD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, PROVIDENCE  
LITTLE CO OF MARY MED CTR  
TORRANCE, PROVIDENCE  
LITTLE CO OF MARY MED CTR  
SAN PEDRO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**







#### **JAZBEH, SAMMER**

Provider ID: 271126  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1770825457  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, PROVIDENCE  
LITTLE CO OF MARY MED CTR  
TORRANCE, PROVIDENCE  
LITTLE CO OF MARY MED CTR  
SAN PEDRO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**




#### **KHURANA, AMAN**

Provider ID: 307768  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1427496710  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **KHURANA, AMAN**

Provider ID: 307766  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1427496710  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **KHURANA, AMAN**

Provider ID: 307765  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Male

NPI: 1427496710

☐ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **KONDILI, DHIMITER**

Provider ID: 283143

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699125450

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **KONDILI, DHIMITER**

Provider ID: 283143

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699125450

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **MARKS, ROBERT**

Provider ID: 300065

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 330 LEWIS ST  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952389934

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ST MARY  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **MARKS, ROBERT**

Provider ID: 300064

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952389934

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ST MARY  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **RITCHIE, DAVID**


Provider ID: 300031

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1407201916

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **RADIOLOGY DIAGNOSTIC**

#### **SADAT, SAYED**

Provider ID: 299969

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1679000806

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **RADIOLOGY DIAGNOSTIC**

#### **SADAT, SAYED**

Provider ID: 304202

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1679000806

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**


#### **SADAT, SAYED**

Provider ID: 299968

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1679000806

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **RADIOLOGY DIAGNOSTIC**

#### **SCHULTZ, HEATHER**

Provider ID: 240342

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)

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## D. 专家名录

926-8273  
Provider Gender: Female  
NPI: 1871910810  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**SCHULTZ, HEATHER**  
Provider ID: 240344  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1871910810  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**SEARLEMAN, ADAM**  
Provider ID: 299948  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1134570641  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**SEARLEMAN, ADAM**  
Provider ID: 299949

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1134570641

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

**SLATER, JERRY**  
Provider ID: 283312  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1851746382  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD




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## D. 专家名录

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, LOMA LINDA  
UNIVERSITY MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **SLATER, JERRY**

Provider ID: 283310  
Board Certified Specialty: No  
UCSD MEDICAL GROUP




 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Male  
NPI: 1851746382

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, LOMA LINDA  
UNIVERSITY MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 303049


N


 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **SPENGLER, NATHAN**

Provider ID: 303048  
Board Certified Specialty: No  
UCSD MEDICAL GROUP



 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1992919666

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**


#### **SPENGLER, NATHAN**

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781



 After Hours Phone: (800) 926-8273

Provider Gender: Male  
NPI: 1992919666

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None



American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **STRAKA, CHRISTOPHER**

Provider ID: 276875  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 16918 DOVE CANYON RD  
STE 103  
SAN DIEGO, CA 92127  
 Phone: (858) 649-5100  
Fax: (858) 649-5099

 After Hours Phone: (858) 649-5100


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## D. 专家名录

Provider Gender: Male  
NPI: 1801281399  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 17\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **RADIOLOGY DIAGNOSTIC**




#### **SWEET, JASON**


Provider ID: 305028  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1326197393  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group



### **RADIOLOGY DIAGNOSTIC**

#### **TADDONIO, MICHAEL**

Provider ID: 304179  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1386987261

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group




### **RADIOLOGY DIAGNOSTIC**

#### **TADDONIO, MICHAEL**

Provider ID: 240407

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1386987261  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **TADDONIO, MICHAEL**

Provider ID: 240408  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1386987261

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## D. 专家名录

 *Provider English Spoken: Y* *American Sign Language (ASL): IPA: UCSD Medical Group*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL*  
*CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **RADIOLOGY DIAGNOSTIC**


#### **TADDONIO, MICHAEL**

*Provider ID: 240405*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Male*

*NPI: 1386987261*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL*  
*CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **RADIOLOGY DIAGNOSTIC**

#### **TADROS, ANTHONY**

*Provider ID: 268546*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Male*

*NPI: 1306112057*

 *Provider English Spoken: Y*

 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL*  
*CTR*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

### **RADIOLOGY DIAGNOSTIC**

#### **TADROS, ANTHONY**

*Provider ID: 304150*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Male*

*NPI: 1306112057*

 *Provider English Spoken: Y*

 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL*  
*CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **RADIOLOGY DIAGNOSTIC**

#### **THOMPSON, COLE**

*Provider ID: 299989*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

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## D. 专家名录

 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **THOMPSON, COLE**

Provider ID: 299988

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **THOMPSON, COLE**

Provider ID: 304175

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1700315264


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **UNSDORFER, KYLE**

Provider ID: 300035

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **UNSDORFER, KYLE**

Provider ID: 300034

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT

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## D. 专家名录

### PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### VAHDOT, NOUSHIN

Provider ID: 300071  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1396700852


 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### VAHDOT, NOUSHIN

Provider ID: 300070  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1396700852



 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: UCSD Medical Group


### RADIOLOGY DIAGNOSTIC

#### VAKILIAN, SIAVOSH

Provider ID: 283207  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 5395 RUFFIN RD STE 103  
SAN DIEGO, CA 92123  
 Phone: (858) 505-4100  
Fax: (858) 429-7939


 After Hours Phone: (858)  
505-4100

Provider Gender: Male  
NPI: 1427456151

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: Community Care IPA LLC


### RADIOLOGY DIAGNOSTIC

#### VAKILIAN, SIAVOSH


Provider ID: 283205  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 3366 5TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 230-0400  
Fax: (858) 429-7936

 After Hours Phone: (619)  
230-0400

Provider Gender: Male  
NPI: 1427456151

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: Community Care IPA LLC

### RADIOLOGY DIAGNOSTIC


#### YORK, VINCENT

Provider ID: 283517  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103

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## D. 专家名录

---

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1790146611

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **RADIOLOGY DIAGNOSTIC**

#### **YORK, VINCENT**

Provider ID: 283519

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1790146611

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **RADIOLOGY DIAGNOSTIC**

#### **ZAPALA, MATTHEW**


Provider ID: 307676

Board Certified Specialty: No

UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346482809

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
MEDICAL CTR AT UCSF, UCSF

Medical Center At Mission Bay,  
UCSF MEDICAL CENTER AT  
MOUNT ZION


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **RADIOLOGY DIAGNOSTIC**

#### **ZAPALA, MATTHEW**

Provider ID: 307675

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1346482809

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,

MEDICAL CTR AT UCSF, UCSF

Medical Center At Mission Bay,  
UCSF MEDICAL CENTER AT  
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **ZAPALA, MATTHEW**




Provider ID: 307678



Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1346482809  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
MEDICAL CTR AT UCSF, UCSF  
Medical Center At Mission Bay,  
UCSF MEDICAL CENTER AT  
MOUNT ZION  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):




N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group





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### **REGISTERED DIETITIAN / NUTRITIONIST**

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#### **CALLAWAY, MALLORY**

Provider ID: 287926  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female





NPI: 1477207611  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



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### **REGISTERED DIETITIAN / NUTRITIONIST**

---

#### **FISHER, JENNIFER**

Provider ID: 286339  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (619) 471-0438  
Fax: (619) 543-3763  
 After Hours Phone: (619)  
471-0438  
Provider Gender: Female  
NPI: 1538312657  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

---

### **REGISTERED DIETITIAN / NUTRITIONIST**

---

#### **FISHER, JENNIFER**

Provider ID: 286340  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1538312657  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

---

### **REGISTERED DIETITIAN / NUTRITIONIST**

---

#### **SIEVERING, DENISE**

Provider ID: 268250  
Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### UCSD MEDICAL GROUP

4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1356478929

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **AGUERO, PETER**

Provider ID: 258299  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

9333 GENESEE AVE STE  
310

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982120861

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **AGUERO, PETER**

Provider ID: 258298  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER  
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982120861

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **BARTZ, BRYAN**

Provider ID: 273381

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER  
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1669818993

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **BARTZ, BRYAN**

Provider ID: 273380

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1669818993

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

**BERGERON, PATRICK**

Provider ID: 206534

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**

Provider ID: 258304

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**

Provider ID: 246022

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

**CORTEZ, AARON**

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## D. 专家名录

Provider ID: 279194  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1639693187

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

#### **COSTELLO, MARK**

Provider ID: 295634

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7510 CLAIREMONT MESA  
BLVD STE 103  
SAN DIEGO, CA 92111

Phone: (858) 277-2277

Fax: (408) 945-4018

After Hours Phone: (858)  
277-2277

Provider Gender: Male

NPI: 1710193602

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, Armenian,  
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

#### **DANG, ERIC**

Provider ID: 258363

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER  
LN STE 200  
SAN DIEGO, CA 92122

Phone: (858) 543-3333

Fax: (858) 657-1809

After Hours Phone: (858)  
543-3333

Provider Gender: Male

NPI: 1891237756

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

#### **DANG, KAYLEE**

Provider ID: 279261

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1316426356

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

#### **FARRAR, COURTNEY**

Provider ID: 303843

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)  
325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

#### **FARRAR, COURTNEY**

Provider ID: 295259

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)  
325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

#### **JOHNSON, KENNADY**

Provider ID: 305041

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730834417

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL THERAPIST**

#### **MC ELROY, CARTER**

Provider ID: 206523

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1114472230

Provider English Spoken: Y

Provider Language(s)  
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **REGISTERED PHYSICAL**

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## D. 专家名录

### THERAPIST

#### **MC ELROY, CARTER**

Provider ID: 206522

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER  
LN STE 200  
SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)  
543-0333

Provider Gender: Male

NPI: 1114472230

Provider English Spoken: Y

Provider Language(s)  
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **NGUYEN, HARRY**

Provider ID: 271871

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1629558499

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **RICKERTS, MATTHEW**

Provider ID: 287652

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1063882579

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### REGISTERED PHYSICAL THERAPIST

#### **RUDD, CHRISTOPHER**

Provider ID: 207560

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1831539337

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

---

### REGISTERED PHYSICAL THERAPIST

---

#### **SKINNER, NICOLE**


Provider ID: 206547

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON


SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1386964997

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST

---


#### **VANDEWIELE, EMILY**

Provider ID: 285183


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1942818505

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST

---

#### **VASQUEZ, BENJAMIN**

Provider ID: 302870

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4910 DIRECTORS PL

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST

---

#### **WALKER, JULIE**


Provider ID: 258489

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER

LN STE 200

SAN DIEGO, CA 92122

 Phone: (855) 543-0333

Fax: (858) 535-6422

 After Hours Phone: (855)  
543-0333

Provider Gender: Female

NPI: 1720489503

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **REGISTERED PHYSICAL THERAPIST**


---

#### **WILLIAMS, STACY**

*Provider ID: 259683*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1689962169*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA*


*JOLLA JOHN SALLY  
THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **REGISTERED PHYSICAL THERAPIST**


---

#### **WILLIAMS, STACY**

*Provider ID: 259684*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4520 EXECUTIVE DR STE 1  
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1689962169*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY  
THORNTON*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **SLEEP MEDICINE**

---


#### **FINCH, CHRISTINA**


*Provider ID: 299938*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4520 EXECUTIVE DR

SAN DIEGO, CA 92121

 *Phone: (800) 926-7283*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-7283*

*Provider Gender: Female*

*NPI: 1598255325*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN*


*DIEGO, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network, UCSD Medical Group*

---

### **SLEEP MEDICINE**


---

#### **FINCH, CHRISTINA**

*Provider ID: 299939*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4168 FRONT ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*



*Provider Gender: Female*

*NPI: 1598255325*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group


### **SPEECH PATHOLOGIST**

#### **AROCHO-SALGADO, MIRELIS**

Provider ID: 296930  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 9655 GRANITE RIDGE DR  
STE 200  
SAN DIEGO, CA 92123  
 Phone: (877) 757-8353  
Fax: (818) 357-2505  
 After Hours Phone: (877)  
757-8353

Provider Gender: Female  
NPI: 1063660165


 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER


 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**

#### **AROCHO-SALGADO, MIRELIS**

Provider ID: 296929  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 11440 W BERNARDO CT  
STE 300  
SAN DIEGO, CA 92127  
 Phone: (877) 757-8353  
Fax: (818) 357-2505  
 After Hours Phone: (877)  
757-8353

Provider Gender: Female  
NPI: 1063660165

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**


#### **AROCHO-SALGADO, MIRELIS**

Provider ID: 296932  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7510 CLAIREMONT MESA  
BLVD STE 103  
SAN DIEGO, CA 92111  
 Phone: (877) 757-8353  
Fax: (818) 357-2505  
 After Hours Phone: (877)

757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None



American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**



#### **CLARK, MELISSA**

Provider ID: 296922  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7510 CLAIREMONT MESA  
BLVD STE 102  
SAN DIEGO, CA 92111  
 Phone: (877) 757-8353  
Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N




Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 7AM-9PM  
M-F 7AM-9PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*




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### **SPEECH PATHOLOGIST**

#### **CLARK, MELISSA**

*Provider ID: 296921*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 9655 GRANITE RIDGE DR  
STE 200  
SAN DIEGO, CA 92123  
 *Phone: (877) 757-8353*  
*Fax: (818) 357-2505*  
 *After Hours Phone: (877) 757-8353*  
*Provider Gender: Female*  
*NPI: 1760546428*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*




N



 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 7AM-7PM  
M-F 7AM-7PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

---



### **SPEECH PATHOLOGIST**

#### **CLARK, MELISSA**

*Provider ID: 296920*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 11440 W BERNARDO CT  
STE 300  
SAN DIEGO, CA 92127  
 *Phone: (877) 757-8353*  
*Fax: (818) 357-2505*  
 *After Hours Phone: (877) 757-8353*  
*Provider Gender: Female*  
*NPI: 1760546428*

 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*



N  
 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 7AM-7PM  
M-F 7AM-7PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*


---

### **SPEECH PATHOLOGIST**



#### **DURNAN, CASSANDRA**

*Provider ID: 307882*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 11440 W BERNARDO CT  
STE 300  
SAN DIEGO, CA 92127  
 *Phone: (877) 757-8353*

*Fax: (818) 357-2505*


 *After Hours Phone: (877) 757-8353*

*Provider Gender: Female*  
*NPI: 1073873501*

 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL):*

N  
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 7AM-7PM*

 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

---



### **SPEECH PATHOLOGIST**

#### **DURNAN, CASSANDRA**

*Provider ID: 307883*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 9655 GRANITE RIDGE DR  
STE 200  
SAN DIEGO, CA 92123  
 *Phone: (877) 757-8353*  
*Fax: (818) 357-2505*

 *After Hours Phone: (877) 757-8353*

*Provider Gender: Female*  
*NPI: 1073873501*

 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL): Provider ID: 296585

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **SPEECH PATHOLOGIST**


**DURNAN, CASSANDRA**

Provider ID: 307885

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 8929 AERO DR STE E  
SAN DIEGO, CA 92123


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **SPEECH PATHOLOGIST**

**O'DORAN, KAYLA**


Provider ID: 296585

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 9655 GRANITE RIDGE DR  
STE 200

SAN DIEGO, CA 92123


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1275021438

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **SPEECH PATHOLOGIST**

**O'DORAN, KAYLA**


Provider ID: 296586

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 7510 CLAIREMONT MESA  
BLVD STE 103

SAN DIEGO, CA 92111

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1275021438

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### **SPEECH PATHOLOGIST**

**O'DORAN, KAYLA**


Provider ID: 296588

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 11440 W BERNARDO CT  
STE 300

SAN DIEGO, CA 92127

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1275021438

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): Board Certified Specialty: No  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **SPEECH PATHOLOGIST**


#### **SCHIEDERMAYER, BENJAMIN**

Provider ID: 288937

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1164979837


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **SPEECH PATHOLOGIST**

#### **UNGER, LINDSEY**

Provider ID: 207202

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8929 UNIVERSITY CENTER  
LN STE 200

SAN DIEGO, CA 92122



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1972936813

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **SURGERY COLON SURGERY**

#### **EISENSTEIN, SAMUEL**

Provider ID: 286363

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE

DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1194983932

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **SURGERY COLON SURGERY**


#### **EISENSTEIN, SAMUEL**

Provider ID: 286384

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (858) 657-7237

 After Hours Phone: (858)  
657-7237

Provider Gender: Male

NPI: 1194983932

 Provider English Spoken: Y  
Cultural Competency: N




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


---

### **SURGERY COLON SURGERY**

#### **EISENSTEIN, SAMUEL**

*Provider ID: 286364*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1194983932*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **SURGERY COLON SURGERY**


#### **LIU, SHANGLEI**

*Provider ID: 273363*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR

SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1043558653*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*


*THORNTON, UNIVERSITY HSP*  
*OF SAN DIEGO CO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **SURGERY COLON SURGERY**


#### **LOPEZ, NICOLE**

*Provider ID: 286387*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (619) 543-6886*

 *After Hours Phone: (619) 543-6886*

*Provider Gender: Female*

*NPI: 1518163005*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*


*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **SURGERY COLON SURGERY**

#### **LOPEZ, NICOLE**

*Provider ID: 286366*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 4303 LA JOLLA VILLAGE  
DR STE 2110

SAN DIEGO, CA 92122

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1518163005*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


---


### **SURGERY COLON SURGERY**

#### **PARRY, LISA**

Provider ID: 286341

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **SURGERY COLON SURGERY**

#### **PARRY, LISA**

Provider ID: 278553

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **SURGERY COLON SURGERY**

#### **RAMAMOORTHY, SONIA**


Provider ID: 286370

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE

DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 529-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1801812656

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **SURGERY CRITICAL CARE**

#### **ADAMS, LAURA**

Provider ID: 284407

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1144616541

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY CRITICAL CARE**


**POTENZA, BRUCE**

Provider ID: 277298

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (619) 543-7200

 After Hours Phone: (619)  
543-7200

Provider Gender: Male

NPI: 1548281496

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY CRITICAL CARE**

**VENTRO, GEORGE**

Provider ID: 284418

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1548604648

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY GENERAL**


**AL-NOURI, OMAR**

Provider ID: 211903

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY GENERAL**


**ARMANI, AVA**

Provider ID: 282141

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (858) 822-6100

 After Hours Phone: (858)  
822-6100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female  
NPI: 1861759383

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: MEDICAL  
CTR AT UCSF, UCSF Medical  
Center At Mission Bay, UCSF  
MEDICAL CENTER AT MOUNT  
ZION, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### SURGERY GENERAL

#### **BARNES, RYAN**


Provider ID: 299904

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7910 FROST ST STE 250  
SAN DIEGO, CA 92123

 Phone: (858) 565-0104

Fax: (858) 565-0194

 After Hours Phone: (858)  
565-0104

Provider Gender: Male

NPI: 1831493501

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### SURGERY GENERAL

#### **BARNES, RYAN**

Provider ID: 129062

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 7910 FROST ST STE 250  
SAN DIEGO, CA 92123

 Phone: (858) 565-0104

Fax: (858) 565-0194

 After Hours Phone: (858)  
565-0104

Provider Gender: Male

NPI: 1831493501

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-4:30PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### SURGERY GENERAL

#### **BENCH, SHAWN**


Provider ID: 299895

Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP

 7910 FROST ST STE 250  
SAN DIEGO, CA 92123

 Phone: (858) 565-0104

Fax: (858) 565-0194

 After Hours Phone: (858)  
565-0104

Provider Gender: Male

NPI: 1669700753

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, KERN  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-TH 9AM-5PM  
F 9AM-4PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **SURGERY GENERAL**

#### **BENCH, SHAWN**

Provider ID: 129060  
Board Certified Specialty: Yes  
COMMUNITY CARE IPA LLC  
📍 7910 FROST ST STE 250  
SAN DIEGO, CA 92123  
☎ Phone: (858) 565-0104  
Fax: (858) 565-0194  
🕒 After Hours Phone: (858)  
565-0104  
Provider Gender: Male  
NPI: 1669700753  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, KERN  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-TH 9AM-5PM  
F 9AM-4PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **SURGERY GENERAL**

#### **BERUMEN, JENNIFER**

Provider ID: 260052  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 8001 FROST ST  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5811  
Fax: (858) 966-8035  
🕒 After Hours Phone: (858)  
966-5811  
Provider Gender: Female  
NPI: 1558566372  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### **SURGERY GENERAL**

#### **BRODERICK, RYAN**

Provider ID: 201617  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP  
📍 4520 EXECUTIVE DR STE 111  
SAN DIEGO, CA 92121  
☎ Phone: (858) 657-8860  
🕒 After Hours Phone: (858)  
657-8860  
Provider Gender: Male  
NPI: 1619252418  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY GENERAL**

#### **BRODERICK, RYAN**

Provider ID: 286342  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1619252418  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY GENERAL**





#### **BRODERICK, RYAN**




Provider ID: 247073  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1619252418  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY GENERAL**

#### **BRUBAKER, ALEAH**








Provider ID: 285272  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4510 EXECUTIVE DR STE 7  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1790104305  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
UCSD LA JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY GENERAL**

#### **BRUBAKER, ALEAH**

Provider ID: 289164  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8001 FROST ST  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8354  
Fax: (858) 966-5815  
 After Hours Phone: (858) 966-8354  
Provider Gender: Female  
NPI: 1790104305  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
UCSD LA JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY GENERAL**

#### **CASILLAS BERUMEN, SERGIO**

Provider ID: 304609

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6402 EL CAJON BLVD STE  
100

SAN DIEGO, CA 92115

Phone: (619) 582-4490

Fax: (619) 501-9702

After Hours Phone: (619)  
582-4490

Provider Gender: Male

NPI: 1437470762

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PARADISE VALLEY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
SCRIPPS MERCY HOSPITAL,  
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SURGERY GENERAL**

#### **CASILLAS BERUMEN, SERGIO**

Provider ID: 304608

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6719 ALVARADO RD STE  
303

SAN DIEGO, CA 92120

Phone: (619) 500-7699

Fax: (619) 483-3997

After Hours Phone: (619)  
500-7699

Provider Gender: Male

NPI: 1437470762

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PARADISE VALLEY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
SCRIPPS MERCY HOSPITAL,  
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SURGERY GENERAL**

#### **FAIRBANKS, TIMOTHY**

Provider ID: 260842

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1407010556

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY GENERAL**

#### **HORGAN, SANTIAGO**

Provider ID: 286367

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE  
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### HORGAN, SANTIAGO

Provider ID: 286379

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (619) 471-0700

After Hours Phone: (619)

471-0700

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### IGNACIO, ROMEO

Provider ID: 217053

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1538147145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### SURGERY GENERAL

#### JACOBSEN, GARTH

Provider ID: 286355

Board Certified Specialty: No

UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE  
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY GENERAL**

#### **JACOBSEN, GARTH**

Provider ID: 286356

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY GENERAL**


#### **JACOBSEN, GARTH**

Provider ID: 201729

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 111  
SAN DIEGO, CA 92121

 Phone: (858) 657-8860

 After Hours Phone: (858)  
657-8860

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY GENERAL**

#### **KOSOY, DANIEL**

Provider ID: 308057

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 8010 FROST ST STE 100  
SAN DIEGO, CA 92123

 Phone: (858) 640-5000

Fax: (858) 636-2903

 After Hours Phone: (858)  
640-5000

Provider Gender: Male

NPI: 1770627259

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC

### **SURGERY GENERAL**


#### **MUELLER, GEORGE**

Provider ID: 54298

Board Certified Specialty: No  
SAN DIEGO GEN AND

VASCULAR SURGEONS MED  
GRP INC

 7910 FROST ST STE 250  
SAN DIEGO, CA 92123

 Phone: (858) 565-0104

Fax: (858) 565-0194

 After Hours Phone: (858)  
565-0104

Provider Gender: Male




NPI: 1629179684

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish,






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8:30AM-5PM  
F 8:30AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### SURGERY GENERAL

#### **MUELLER, GEORGE**



Provider ID: 300091  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7910 FROST ST STE 250  
SAN DIEGO, CA 92123  
 Phone: (858) 565-0104  
Fax: (858) 565-0194  
 After Hours Phone: (858)  
565-0104  
Provider Gender: Male  
NPI: 1629179684  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish,  
Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8:30AM-5PM  
F 8:30AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### SURGERY GENERAL


#### **POLLACK, LARRY**

Provider ID: 54346  
Board Certified Specialty: Yes  
SAN DIEGO GEN AND  
VASCULAR SURGEONS MED  
GRP INC  
 7910 FROST ST STE 250  
SAN DIEGO, CA 92123  
 Phone: (858) 565-0104  
Fax: (858) 565-0194  
 After Hours Phone: (858)  
565-0104  
Provider Gender: Male  
NPI: 1104998400  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German, Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Hours: M-TH 9AM-5PM  
F 9AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC

### SURGERY GENERAL

#### **SANDLER, BRYAN**

Provider ID: 286383  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1043410186  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### SURGERY GENERAL

#### **SANDLER, BRYAN**

Provider ID: 286357  
Board Certified Specialty: No

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

### UCSD MEDICAL GROUP

4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1043410186

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### SANTORELLI, JARRETT

Provider ID: 272303

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033529201

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

### VASCULAR

#### AL-NOURI, OMAR

Provider ID: 275349

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE  
215

SAN DIEGO, CA 92121

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

### VASCULAR

#### BARLEBEN, ANDREW

Provider ID: 275372

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE  
215

SAN DIEGO, CA 92121

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1497936900

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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## D. 专家名录






N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



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### **SURGERY HAND**

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#### **CAGE, DORI NEILL**

Provider ID: 296731  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 8008 FROST ST STE 403  
SAN DIEGO, CA 92123  
 Phone: (858) 715-9200  
Fax: (858) 715-9202  
 After Hours Phone: (858)  
715-9200  
Provider Gender: Female  
NPI: 1871592253  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, Sharp  
Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: IHP of Southern Cal-PHP


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### **SURGERY HAND ORTHOPEDIC**




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#### **STEPHENSON, SAMUEL**

Provider ID: 284934  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1578058665

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### **SURGERY NEUROLOGICAL**



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#### **BARBA, DAVID**

Provider ID: 244087  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (619) 543-5720  
 After Hours Phone: (619)  
543-5720

Provider Gender: Male  
NPI: 1093730251

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, SCRIPPS  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### **SURGERY NEUROLOGICAL**

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#### **BELVERUD, SHAWN**

Provider ID: 202333  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273






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## D. 专家名录

Provider Gender: Male  
NPI: 1073817268  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**






#### **BEN-HAIM, SHARONA**


Provider ID: 304129  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1942469663  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hebrew, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**









#### **LEVY, MICHAEL**

Provider ID: 298705  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 7910 FROST ST STE 180  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8574  
Fax: (858) 966-7930  
 After Hours Phone: (858)  
966-8574  
Provider Gender: Male  
NPI: 1164593927  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
CHILDRENS HOSP OF LOS  
ANGELES  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network


### **SURGERY NEUROLOGICAL**

#### **MARSHALL, LAWRENCE**

Provider ID: 244150  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1750306171  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German, Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

#### **OSORIO, JOSEPH**

Provider ID: 304170  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD

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## D. 专家名录

SAN DIEGO, CA 92120  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1437416591  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

**OSORIO, JOSEPH**  
Provider ID: 242007  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1437416591  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

**PHAM, MARTIN**  
Provider ID: 244158  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1609130921  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT

PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

**SOUMEKH, MASSOUD**  
Provider ID: 257468  
Board Certified Specialty: Yes  
BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT  
📍 8008 FROST ST STE 401  
SAN DIEGO, CA 92123  
☎ Phone: (858) 560-8544  
Fax: (858) 560-8546  
🕒 After Hours Phone: (858) 560-8544  
Provider Gender: Male  
NPI: 1265495014  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: ALVARADO  
HOSP MED CTR, ALVARADO  
HOSPITAL LLC, SHARP  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-TH 9AM-4:30PM  
🌐 Website: N/A  
IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### **SURGERY NEUROLOGICAL**

#### **TOMLIN, JEFFREY**

Provider ID: 272950

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103

Phone: (858) 657-8540

After Hours Phone: (858)  
657-8540

Provider Gender: Male

NPI: 1366530321

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

#### **U, HOI**

Provider ID: 244132

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1164468146

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **ANDRY, JAMES**

Provider ID: 302086

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7910 FROST ST STE 340  
SAN DIEGO, CA 92123

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)  
824-1703

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SURGERY ORTHOPEDIC**

#### **BALLARD, BROOKE**

Provider ID: 262204

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

5555 RESERVOIR DR STE  
104

SAN DIEGO, CA 92120

Phone: (619) 286-9480

Fax: (619) 286-4568

After Hours Phone: (619)  
286-9480

Provider Gender: Female

NPI: 1841447950

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N




Hospital Affiliation: ALVARADO

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## D. 专家名录

HOSPITAL LLC, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None



American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Imperial Health Holdings  
Medical Group-SD

### **SURGERY ORTHOPEDIC**




#### **BLAIS, MICAH**

Provider ID: 299943  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1972867562  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

#### **BUI, CHRISTOPHER**

Provider ID: 241162  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1619231537

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

#### **BUKATA, SUSAN**

Provider ID: 277948

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932140639

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


#### **BUKATA, SUSAN**

Provider ID: 304181

Board Certified Specialty: No

UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1932140639

 Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

#### **CAMPBELL, TANNER**

Provider ID: 301633

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)  
966-6789

Provider Gender: Male

NPI: 1821593096

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**


#### **CHENG, YU-TSUN**

Provider ID: 301903

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)  
966-6789

Provider Gender: Male

NPI: 1992982854

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SOUTHWEST  
HEALTHCARE INLAND

VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **SURGERY ORTHOPEDIC**

#### **CHIARAPPA, FRANK**

Provider ID: 304174

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1932536828

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

#### **CHOI, JIHOON**

Provider ID: 284788

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781


 After Hours Phone: (800)



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## D. 专家名录

926-8273  
Provider Gender: Male  
NPI: 1285097741  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group




### **SURGERY ORTHOPEDIC**

**CIDAMBI, EMILY**  
Provider ID: 296446  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800  
Provider Gender: Female  
NPI: 1659634699  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network








### **SURGERY ORTHOPEDIC**

**CIDAMBI, EMILY**  
Provider ID: 246466  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3030 CHILDRENS WAY FL  
3  
SAN DIEGO, CA 92123  
 Phone: (858) 966-6789  
Fax: (858) 966-6706  
 After Hours Phone: (858)  
966-6789  
Provider Gender: Female  
NPI: 1659634699  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**

**EDMONDS, ERIC**

Provider ID: 260841  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 3030 CHILDRENS WAY FL  
3  
SAN DIEGO, CA 92123  
 Phone: (858) 966-6789  
Fax: (858) 966-6706  
 After Hours Phone: (858)  
966-6789  
Provider Gender: Male  
NPI: 1013048412  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**




**EDMONDS, ERIC**  
Provider ID: 205495  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

### NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1013048412

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A



IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**

#### **FLINT, JAMES**

Provider ID: 304177


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1629239140


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **FLINT, JAMES**


Provider ID: 203178

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (858) 657-8200  
 After Hours Phone: (858)  
657-8200

Provider Gender: Male

NPI: 1629239140


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **GOEB, YANNICK**

Provider ID: 284794



Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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## D. 专家名录

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **JACKSON, MADELEINE**

Provider ID: 301818

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-8800  
After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1386140085

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY ORTHOPEDIC**

#### **KUSNEZOV, NICHOLAS**

Provider ID: 303196

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7910 FROST ST STE 340

SAN DIEGO, CA 92123

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)  
824-1703

Provider Gender: Male

NPI: 1396185161

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SURGERY ORTHOPEDIC**

#### **PRUSS, ERIKA**

Provider ID: 303797

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
3

SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)  
966-6789

Provider Gender: Female

NPI: 1538402441

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

### **SURGERY ORTHOPEDIC**

#### **SULLIVAN, THOMAS**

Provider ID: 285247

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### **SURGERY ORTHOPEDIC**

#### **SULLIVAN, THOMAS**

Provider ID: 304164

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---



### **SURGERY ORTHOPEDIC**

#### **UPASANI, VIDYADHAR**

Provider ID: 205914

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800  
 After Hours Phone: (858)

966-8800

Provider Gender: Male

NPI: 1548417652


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **SURGERY ORTHOPEDIC**


#### **UPASANI, VIDYADHAR**

Provider ID: 260953

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789  
Fax: (858) 966-6706

 After Hours Phone: (858)  
966-6789

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---

### **SURGERY PEDIATRIC**

#### **BICKLER, STEPHEN**

Provider ID: 270090

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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## D. 专家名录

### NETWORK

3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1891866653

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### SURGERY PEDIATRIC

#### **GOSMAN, AMANDA**

Provider ID: 205841

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

7920 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-4064

After Hours Phone: (858)

966-5999

Provider Gender: Female

NPI: 1164436291

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### SURGERY PEDIATRIC

#### **KELLER, BENJAMIN**

Provider ID: 285941

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1285953364

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

### SURGERY PEDIATRIC

#### **KELLER, BENJAMIN**

Provider ID: 272196

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

7920 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-4064

After Hours Phone: (858)  
966-5999

Provider Gender: Male

NPI: 1285953364

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: Rady Childrens Health Network

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### **SURGERY PEDIATRIC**

#### **KLING, KAREN**

Provider ID: 283380

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)  
966-7711

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND

NEWBORNS, NATIONAL  
NAVAL MED CTR, SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

### **SURGERY PEDIATRIC**


#### **KLING, KAREN**

Provider ID: 205340

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)  
966-7711

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND

NEWBORNS, NATIONAL  
NAVAL MED CTR, SHARP  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


### **SURGERY PEDIATRIC**

#### **LAZAR, DAVID**

Provider ID: 283140

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123


 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1538365002

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

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## D. 专家名录

### Network

#### **SURGERY PEDIATRIC**

##### **LAZAR, DAVID**

Provider ID: 205606

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1538365002

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### **SURGERY PEDIATRIC**

##### **THANGARAJAH, HARIHARAN**

Provider ID: 206172

Board Certified Specialty: No

### RADY CHILDRENS HEALTH NETWORK

8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### **SURGERY PEDIATRIC**

##### **THANGARAJAH, HARIHARAN**

Provider ID: 256194

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)

966-7711

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### **SURGERY PLASTIC**

##### **HINCHCLIFF, KATHARINE**

Provider ID: 277288

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346674561

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


### **SURGERY PLASTIC**

**HINCHCLIFF, KATHARINE**

Provider ID: 277965

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-8394

 After Hours Phone: (858)  
966-5999

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group


### **SURGERY PLASTIC**

**KOLB, FREDERIC**

Provider ID: 255576

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123


 Phone: (858) 966-5999

Fax: (858) 966-8394

 After Hours Phone: (858)  
966-5999

Provider Gender: Female

NPI: 1790341832

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY PLASTIC**

**KOLB, FREDERIC**

Provider ID: 255575

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1790341832

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY PLASTIC**

**KOLB, FREDERIC**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 246239  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1790341832

Provider English Spoken: Y  
Provider Language(s)  
Spoken: French

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY PLASTIC**

#### **KOLB, FREDERIC**

Provider ID: 246240  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1790341832

Provider English Spoken: Y  
Provider Language(s)  
Spoken: French

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY PLASTIC**

#### **LEWIS, PRIYA**

Provider ID: 302132  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7920 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 966-5999  
Fax: (858) 966-8394

After Hours Phone: (858) 966-5999

Provider Gender: Female  
NPI: 1720465024

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY PLASTIC**

#### **REID, CHRISTOPHER**

Provider ID: 245523  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7920 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 966-5999  
Fax: (858) 966-8394

After Hours Phone: (858) 966-5999

Provider Gender: Male  
NPI: 1982964276

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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### **SURGERY PLASTIC**


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#### **REID, CHRISTOPHER**

Provider ID: 224795

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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### **SURGERY PLASTIC**


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#### **REID, CHRISTOPHER**

Provider ID: 255564

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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### **SURGERY THORACIC**

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#### **FOX, KENNETH**

Provider ID: 257841

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8030

 After Hours Phone: (858)  
966-8030

Provider Gender: Male

NPI: 1235153552

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **SURGERY THORACIC**

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#### **GANTA, SRUJAN**


Provider ID: 256383

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8030


 After Hours Phone: (858)  
966-8030

Provider Gender: Male




NPI: 1265071005

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19




American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group


### **SURGERY THORACIC**




#### **GANTA, SRUJAN**

Provider ID: 275611  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8030  
 After Hours Phone: (858)  
966-8030

Provider Gender: Male  
NPI: 1265071005


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):


N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### **SURGERY THORACIC**

#### **LEWIS, MICHAEL**


Provider ID: 296906  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8030  
Fax: (858) 966-8032




 After Hours Phone: (858)  
966-8030

Provider Gender: Male  
NPI: 1780847533

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No  
Min/Max Age: 0\19

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network


### **SURGERY THORACIC**

#### **NIGRO, JOHN**

Provider ID: 205367


Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY STE  
202  
SAN DIEGO, CA 92123

 Phone: (858) 966-8030  
Fax: (858) 966-8032

 After Hours Phone: (858)  
966-8030


Provider Gender: Male  
NPI: 1881707818

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### **SURGERY THORACIC**

#### **VOSSLER, JOHN**

Provider ID: 306389


Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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## D. 专家名录

### NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Male

NPI: 1659630572


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### TRANSPLANT SURGERY


#### MEKEEL, KRISTIN


Provider ID: 262109

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY STE  
107

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858)  
966-7711

Provider Gender: Female

NPI: 1104861947

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### TRANSPLANT SURGERY

#### SCHNICKEL, GABRIEL

Provider ID: 262192

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8001 FROST ST  
SAN DIEGO, CA 92123

 Phone: (858) 966-8354

Fax: (858) 966-5815

 After Hours Phone: (858)  
966-8354

Provider Gender: Male

NPI: 1619111440

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### UROLOGY

#### CHEN, TONY

Provider ID: 283960

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1245684497

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, PALOMAR MEDICAL  
CENTER

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### UROLOGY

---

#### KATZ, JONATHAN

Provider ID: 299918

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952756207

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### UROLOGY

---


#### MONGA, MANOJ

Provider ID: 274480


Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174609127

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### UROLOGY

---

#### MONGA, MANOJ

Provider ID: 256847

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174609127

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### UROLOGY


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#### PATEL, DEVIN

Provider ID: 246094

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (858) 657-7876

 After Hours Phone: (858)  
657-7876

Provider Gender: Male

NPI: 1437505559

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, CEDARS SINAI

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## D. 专家名录


### MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### UROLOGY

#### **SWORDS, KELLY**

Provider ID: 206183

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

Fax: (858) 966-4064

 After Hours Phone: (858)  
966-7484

Provider Gender: Female

NPI: 1316101256

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### UROLOGY

#### **UNTERBERG, STEPHEN**

Provider ID: 295833

Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP

 4060 4TH AVE STE 310  
SAN DIEGO, CA 92103

 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)  
297-4707

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### UROLOGY

#### **UNTERBERG, STEPHEN**

Provider ID: 284664

Board Certified Specialty: Yes  
COMMUNITY CARE IPA LLC

 4060 4TH AVE STE 310  
SAN DIEGO, CA 92103

 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)  
297-4707

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### UROLOGY

#### **UNTERBERG, STEPHEN**

Provider ID: 284665

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 11770 BERNARDO PLAZA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

CT STE 270  
SAN DIEGO, CA 92128  
☎ Phone: (858) 485-0554  
Fax: (858) 429-7933  
🕒 After Hours Phone: (858) 485-0554  
Provider Gender: Male  
NPI: 1215374210  
🗒 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### UROLOGY

**UNTERBERG, STEPHEN**  
Provider ID: 295834  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 11770 BERNARDO PLAZA  
CT STE 270  
SAN DIEGO, CA 92128  
☎ Phone: (858) 485-0554  
Fax: (858) 429-7933  
🕒 After Hours Phone: (858) 485-0554

Provider Gender: Male  
NPI: 1215374210  
🗒 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, PALOMAR MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### UROLOGY

**WANG, LUKE**  
Provider ID: 299933  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1033630173  
🗒 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

## SAN MARCOS

### CARDIOVASCULAR DISEASE

**LERNER, JONATHAN**  
Provider ID: 303448  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 955 BOARDWALK STE 100  
SAN MARCOS, CA 92078  
☎ Phone: (760) 798-8855  
Fax: (619) 616-2104  
🕒 After Hours Phone: (760) 798-8855

Provider Gender: Male  
NPI: 1962899823  
🗒 Provider English Spoken: Y  
🗒 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **CERTIFIED ACUPUNCTURIST**

#### **CARRA, BARBARA**

Provider ID: 303128

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 100  
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)  
Spoken: Italian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

#### **CARRA, BARBARA**

Provider ID: 308116

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)

736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)  
Spoken: Italian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

#### **GONZALEZ, ANDRES**

Provider ID: 298658

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 100  
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **BLAND, JACELIS**

Provider ID: 296766

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE**

#### **PRACTITIONER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### FODDA, RAMI

Provider ID: 296603

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### FREEMAN, WANDA

Provider ID: 305751

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1659504264

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### GARCIA, REGINA

Provider ID: 297837

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1639673858

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### HAN, ANGELA

Provider ID: 300215

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1629242839

Provider English Spoken: Y

Provider Language(s)  
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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## D. 专家名录

### CERTIFIED NURSE PRACTITIONER

#### **KOHOUT, KATHRYN**

Provider ID: 291105

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 556-1501

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1316544331

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-8PM  
SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **MAROSOK, MICHELLE**

Provider ID: 305310

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

838 NORDAHL RD STE 300  
SAN MARCOS, CA 92069

Phone: (760) 748-8935

Fax: (760) 466-0078

After Hours Phone: (760)  
748-8935

Provider Gender: Female

NPI: 1669166112

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### CERTIFIED NURSE PRACTITIONER

#### **MOONEY, PATRICIA**

Provider ID: 280382

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

838 NORDAHL RD STE 300  
SAN MARCOS, CA 92069

Phone: (760) 747-8935

Fax: (760) 466-0078

After Hours Phone: (760)  
747-8935

Provider Gender: Female

NPI: 1700470200

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### CERTIFIED NURSE PRACTITIONER

#### **NGUYEN, VANESSA**

Provider ID: 306716

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

838 NORDAHL RDSTE 200  
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)  
281-3662

Provider Gender: Female

NPI: 1376219246

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

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## D. 专家名录

### PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1972090306

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### PRIETO, ALEJANDRA

Provider ID: 297888

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1699222620

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### VAHDAT, VALERIE

Provider ID: 294758

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2085 MONTIEL RD STE 102  
SAN MARCOS, CA 92069

Phone: (833) 867-4642

Fax: (360) 462-5827

After Hours Phone: (833)  
867-4642

Provider Gender: Female

NPI: 1093474090

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

### YCASAS, EMILY

Provider ID: 307853

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1033841861

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### CERTIFIED REGISTERED NURSE MIDWIFE

### BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPREDA RD

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1407287469

🗨 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### CHIROPRACTOR

#### HINES, TAYTE

Provider ID: 302081

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 2085 MONTIEL RD STE 102  
SAN MARCOS, CA 92069

☎ Phone: (833) 867-4642

Fax: (360) 462-5827

🕒 After Hours Phone: (833) 867-4642

Provider Gender: Male

NPI: 1598265647

🗨 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 307941

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### CHIROPRACTOR

#### HINES, TAYTE

Provider ID: 302080

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 2085 MONTIEL RD STE 102  
SAN MARCOS, CA 92069

☎ Phone: (833) 867-4642

Fax: (360) 462-5827

🕒 After Hours Phone: (833) 867-4642

Provider Gender: Male

NPI: 1598265647

🗨 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### CHIROPRACTOR

#### JIMENEZ, CLARIBEL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1801255484

🗨 Provider English Spoken: Y

🗨 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### INTERNAL MEDICINE

#### TOLENTINO, ARTURO

Provider ID: 298696

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 2085 MONTIEL RD STE 102  
SAN MARCOS, CA 92069

☎ Phone: (833) 867-4642

Fax: (360) 462-5827

🕒 After Hours Phone: (833) 867-4642


Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1609066018

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER, LAKEWOOD


REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY

#### **DO, HULBERT**

Provider ID: 295941

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 955 BOARDWALK STE 100  
SAN MARCOS, CA 92078

 Phone: (760) 798-8855

Fax: (619) 616-2104

 After Hours Phone: (760)  
798-8855

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY

#### **DO, HULBERT**

Provider ID: 291583

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp


Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-8PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERVENTIONAL CARDIOLOGY

#### **MOHAMEDALI, BURHAN**

Provider ID: 245578

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 955 BOARDWALK STE 100  
SAN MARCOS, CA 92078

 Phone: (760) 798-8855

Fax: (760) 755-5245

 After Hours Phone: (760)  
798-8855

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **SUDHAKAR, DEEPTHI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider ID: 296052  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
955 BOARDWALK STE 100  
SAN MARCOS, CA 92078  
Phone: (760) 798-8855  
Fax: (619) 616-2104  
After Hours Phone: (760) 798-8855  
Provider Gender: Female  
NPI: 1811307051  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 15\99  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**  
Provider ID: 291607  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
150 VALPRED A RD  
SAN MARCOS, CA 92069  
Phone: (760) 736-6767  
Fax: (760) 736-8740

After Hours Phone: (760) 736-6767  
Provider Gender: Female  
NPI: 1811307051  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**  
Provider ID: 295847  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
955 BOARDWALK STE 100  
SAN MARCOS, CA 92078  
Phone: (760) 798-8855  
Fax: (619) 616-2104  
After Hours Phone: (760) 798-8855  
Provider Gender: Female  
NPI: 1811307051  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp





Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### NEUROLOGY

**ANDER, AZIZ**  
Provider ID: 290382  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
838 NORDAHL RD STE 310  
SAN MARCOS, CA 92069  
Phone: (442) 999-5977  
Fax: (442) 999-5914  
After Hours Phone: (442) 999-5977  
Provider Gender: Male  
NPI: 1316131832  
Provider English Spoken: Y  
Provider Language(s) Spoken: Faroese  
Cultural Competency: N  
Hospital Affiliation: DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, PALOMAR HEALTH, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):  Hours: M-F 8AM-5PM  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
8:30AM-4:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### NEUROLOGY









#### GUPTA, MONIKA

Provider ID: 307938  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 838 NORDAHL RD STE 200  
SAN MARCOS, CA 92069  
 Phone: (760) 281-3662  
Fax: (760) 316-5268  
 After Hours Phone: (760)  
281-3662  
Provider Gender: Female  
NPI: 1922243401  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi, Spanish  
Cultural Competency: N  
Hospital Affiliation: TEMECULA  
VALLEY HOSPITAL INC, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### NEUROLOGY



#### HOSSEIN ZADEH MALEKI, ANA


Provider ID: 304998  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 838 NORDAHL RD STE 200  
SAN MARCOS, CA 92069  
 Phone: (760) 281-3662  
Fax: (760) 316-5268  
 After Hours Phone: (760)  
281-3662  
Provider Gender: Female  
NPI: 1316471485  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Persian  
Cultural Competency: N  
Hospital Affiliation: TEMECULA  
VALLEY HOSPITAL INC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### NEUROLOGY



#### MAREK, MAKSYM

Provider ID: 306708  
Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP  
 838 NORDAHL RD STE 200  
SAN MARCOS, CA 92069  
 Phone: (760) 281-3662  
Fax: (619) 425-3842


 After Hours Phone: (760)  
281-3662

Provider Gender: Male  
NPI: 1881182079

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Hindi, Spanish,  
Tagalog

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 9AM-0:30PM

 Website: N/A  
IPA: IHP of Southern Cal-PHP

### NEUROLOGY

#### SORIA LOPEZ, JOSE

Provider ID: 295745  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 838 NORDAHL RD STE 200  
SAN MARCOS, CA 92069  
 Phone: (760) 281-3662

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (760) 316-5268

☎ After Hours Phone: (760) 281-3662

Provider Gender: Male

NPI: 1225474034

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

TEMECULA VALLEY HOSPITAL  
INC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-6PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **OBSTETRICS / GYNECOLOGY**

#### **CABRERA, MICHELLE**

Provider ID: 303025

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD

SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1174774723

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Adventist

Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **OBSTETRICS / GYNECOLOGY**

#### **HINSHAW, PAUL**

Provider ID: 288907

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 120 CRAVEN RD STE 101

SAN MARCOS, CA 92078

☎ Phone: (760) 740-2710

Fax: (858) 207-0003

☎ After Hours Phone: (760) 740-2710

Provider Gender: Male

NPI: 1215170717

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

Rady Childrens Health

Network

### **PEDIATRICS**

#### **LUM HO, RACHEL**

Provider ID: 304047

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 150 VALPREDA RD

SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6797

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1215469283

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

SA 8AM-5PM

🌐 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **PEDIATRICS**

#### **LUM HO, RACHEL**

Provider ID: 303150

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6797

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1215469283

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **PEDIATRICS**

#### **POSADAS, EMERITO**

Provider ID: 257536

Board Certified Specialty: No  
BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT

### **PEDIATRICS**

#### **QUINTERO, CAROLYN**

Provider ID: 303142

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1023033156

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **CELESTINO, MISHEL**

Provider ID: 302439

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1578263760

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**


#### **GRAF, HALEY**

Provider ID: 301290

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

 Phone: (760) 436-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
436-6767

Provider Gender: Female

NPI: 1598394371

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**


#### **HERNANDEZ, MIRIAM**

Provider ID: 298336

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6767

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1457903700


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**


#### **MATHIAS, WILLIAM**

Provider ID: 302570

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 566-1501

 After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1285806323

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**


#### **MONTES, VIVIAN**

Provider ID: 307729

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1881358026

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **POLLEY, SHANNON**

Provider ID: 296093

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1225608722

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-8PM  
SA 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

### **ALTAMIRANO, LEON**

Provider ID: 290362

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1619271517

🗨 Provider English Spoken: Y

🗨 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

### **ARIELLA, LYNDA**

Provider ID: 299716

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1073518965

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\50

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

### **FLYNN, DANIELLE**

Provider ID: 290795

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1477785137

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

### **GEORGIEV, MARY JO**

Provider ID: 290793

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 737-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)  
737-6767

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 1518996875

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PSYCHOLOGIST**

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#### **IMAM, SYED**

Provider ID: 298174

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1447428271

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 15\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PSYCHOLOGIST**

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#### **SIMPSON, ERIC**

Provider ID: 290803

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1710110416

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PSYCHOLOGIST**

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#### **TORRES, HECTOR**

Provider ID: 290788

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)

736-6767

Provider Gender: Male

NPI: 1720265614

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **RHEUMATOLOGY**

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#### **AL NAHLAWI, BASMA**

Provider ID: 290068

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

334 VIA VERA CRUZ STE  
251

SAN MARCOS, CA 92078

Phone: (760) 736-8091

Fax: (760) 736-8092

After Hours Phone: (760)  
736-8091

Provider Gender: Female

NPI: 1144455262

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N




Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

MEDICAL CENTER, LOMA  
LINDA UNIVERSITY MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### RHEUMATOLOGY

#### **AL NAHLAWI, BASMA**







Provider ID: 295532  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 960 W SAN MARCOS BLVD  
STE 210  
SAN MARCOS, CA 92078  
 Phone: (760) 736-8091  
Fax: (760) 736-8092  
 After Hours Phone: (760)  
736-8091  
Provider Gender: Female  
NPI: 1144455262  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: LOMA  
LINDA UNIVERSITY MED CTR  
MURRIETA, PALOMAR  
MEDICAL CENTER, LOMA  
LINDA UNIVERSITY MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SAN YSIDRO**

### CERTIFIED NURSE PRACTITIONER








#### **IBARRA, MARTHA**

Provider ID: 304292  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1114957289  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **KANTAS, PARIS**

Provider ID: 306684  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-6341  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Male  
NPI: 1114329612  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 2\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### **ROSCOE, SYDNEY**

Provider ID: 306249

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-5305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1992448864

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### FAMILY PRACTICE

**ALVAREZ-ESTRADA, MIGUEL**

Provider ID: 294925

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### FAMILY PRACTICE

**ARRIETA, NOEMI**

Provider ID: 297794

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### FAMILY PRACTICE

**DALUGDUGAN, ESTHER**

Provider ID: 302285

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>MALEKMADANI, ARIENNE</b> Provider ID: 303333 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 4004 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 Fax: (619) 205-6341 After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1124648332 Provider English Spoken: Y Provider Language(s) Spoken: Persian, Spanish Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP	<input type="checkbox"/> After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1952563421 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Filipino, Spanish, Tagalog Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM Website: N/A IPA: IHP of Southern Cal-PHP	NPI: 1558924936 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP
<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>NAVARRO, VANESSA MARIA</b> Provider ID: 297756 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 1666 PRECISION PARK LN SAN YSIDRO, CA 92173 Phone: (619) 662-4100 Fax: (619) 785-3384	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>ORTEGA, LUIS</b> Provider ID: 295225 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 4004 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 Fax: (619) 205-6341 After Hours Phone: (619) 662-4100 Provider Gender: Male	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>ORTIZ ILIZALITURRI, ANA</b> Provider ID: 296008 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 4050 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1316407026 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### GENERAL PRACTICE

**GARCIA-SANDOVAL,  
DAMARIS**

Provider ID: 302644

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 662-4198

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1447838883

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### GENERAL PRACTICE

**SAMI, REMAN**

Provider ID: 305484

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1295362242

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INFECTIOUS DISEASE

**ALDOUS, JEANNETTE**


Provider ID: 290421

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERNAL MEDICINE

**BULOW, KWI**

Provider ID: 302346

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1073608576

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### INTERNAL MEDICINE

#### **RAMIREZ SANCHEZ, CLAUDIA**

Provider ID: 296122

Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1659720555

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-2PM

 Website: N/A


IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group


### INTERNAL MEDICINE

#### **SY, RAMON**


Provider ID: 297757

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 785-3384

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1982617403

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### OBSTETRICS / GYNECOLOGY

#### **DINH, MY**

Provider ID: 290490

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 428-4463

Fax: (213) 250-3369

 After Hours Phone: (619)  
428-4463

Provider Gender: Female

NPI: 1316146996


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### OBSTETRICS / GYNECOLOGY

#### **GOMEZ, DANIELA**

Provider ID: 294886

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1967

 After Hours Phone: (619)

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

662-4100

Provider Gender: Female

NPI: 1255878997


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-2PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### **OBSTETRICS / GYNECOLOGY**


#### **GOMEZ, DANIELA**

Provider ID: 294885

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD STE  
400

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1255878997

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 16\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

#### PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-2PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **OPHTHALMOLOGY**

#### **DE SILVA, NIHAL**

Provider ID: 290551

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1003834789

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
MARINHEALTH AND  
MARINHEALTH MEDICAL  
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PEDIATRICS**

#### **FUJII, CINDY**

Provider ID: 298309

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1871664821

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **PEDIATRICS**

#### **RODRIGUEZ, ALDO**


Provider ID: 295779

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 662-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

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## D. 专家名录

NPI: 1508209651

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Portuguese,  
Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 10AM-4PM  
M 8:30AM-8PM  
W-F 8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### PEDIATRICS

#### **TAYLOR, TASHA**

Provider ID: 290077

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 205-1972

Fax: (619) 205-6305

 After Hours Phone: (619)  
205-1972

Provider Gender: Female

NPI: 1528144433

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### PHYSICIANS ASSISTANT

#### **MARISCAL, MIGUEL**

Provider ID: 306369

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1760508923

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### PSYCHOLOGIST

#### **IBANEZ, BERENICE**

Provider ID: 290465

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1740394386

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

#### **JOHNSON, JENNIFER**

Provider ID: 301296

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN YSIDRO, CA 92173  
☎ Phone: (619) 662-4100  
Fax: (619) 205-6341  
🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1023783248

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\64

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL THERAPIST**

#### **TORRES, JOANN**

Provider ID: 296045

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1134732522

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **RHEUMATOLOGY**

#### **LWIN, THUTHIRI**

Provider ID: 307650

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1174010896

🗉 Provider English Spoken: Y

🗉 Provider Language(s)  
Spoken: Burmese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**

#### **HILL, CARLA**

Provider ID: 295894

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 3364 BEYER BLVD STE  
102-103

SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1043950751

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **SANTEE**

### **PHYSICIANS ASSISTANT**

#### **ROSENBLATT, SHERILYN**

Provider ID: 295738

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 120 TOWN CENTER PKWY  
SANTEE, CA 92071

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1114041621

🗉 Provider English Spoken: Y  
Cultural Competency: N

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## D. 专家名录

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 10AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **RADIOLOGY DIAGNOSTIC**

#### **MOORE, BRIAN**

Provider ID: 243961

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 9640 MISSION GORGE RD  
STE H  
SANTEE, CA 92071

 Phone: (619) 460-2770

Fax: (619) 460-2774

 After Hours Phone: (619)  
460-2770

Provider Gender: Male

NPI: 1831144005

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


### **RADIOLOGY DIAGNOSTIC**

#### **VENKATESH, VIJAY**

Provider ID: 269661

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 9640 MISSION GORGE RD  
STE H  
SANTEE, CA 92071

 Phone: (619) 460-2770

Fax: (619) 460-2774

 After Hours Phone: (619)  
460-2770

Provider Gender: Male

NPI: 1689627085

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **TEMECULA**


### **CERTIFIED ACUPUNCTURIST**

#### **CRAFT, KEVIN**


Provider ID: 290944

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 41840 ENTERPRISE CIR N  
TEMECULA, CA 92590

 Phone: (951) 225-6400

Fax: (360) 462-2751

 After Hours Phone: (951)  
225-6400

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: TU-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **CERTIFIED NURSE**


### **PRACTITIONER**

#### **MIRACLE, ANGELYN**

Provider ID: 300260

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 31170 TEMECULA PKWY  
STE 200  
TEMECULA, CA 92592

 Phone: (951) 699-3299

Fax: (951) 302-1313

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ After Hours Phone: (951) 699-3299

Provider Gender: Female

NPI: 1144539842

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### CERTIFIED NURSE PRACTITIONER

#### **VAHDAT, VALERIE**

Provider ID: 306580

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 41840 ENTERPRISE CIR N TEMECULA, CA 92590

☎ Phone: (951) 225-6400

Fax: (360) 462-2751

☎ After Hours Phone: (951) 225-6400

Provider Gender: Female

NPI: 1093474090

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### **ANWAR, YASMIN**

Provider ID: 300846

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 31515 RANCHO PUEBLO RD STE 102 TEMECULA, CA 92592

☎ Phone: (951) 225-7873

Fax: (951) 305-9117

☎ After Hours Phone: (951) 225-7873

Provider Gender: Female

NPI: 1588602247

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

#### **WOODWORTH, JENNIFER**

Provider ID: 290633

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 41840 ENTERPRISE CIR N TEMECULA, CA 92590

☎ Phone: (951) 225-6400

Fax: (858) 633-4697

☎ After Hours Phone: (951) 225-6400

Provider Gender: Female

NPI: 1639362494

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### SURGERY GENERAL VASCULAR

#### **HOWE, STEVEN**

Provider ID: 206759

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 31700 TEMECULA VALLEY PARKWAY TEMECULA, CA 92592

☎ Phone: (951) 303-2349

Fax: (951) 303-8591

☎ After Hours Phone: (951) 303-2349




Provider Gender: Male

NPI: 1497702740

☑ Provider English Spoken: Y






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## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*





### VISTA

#### ANESTHESIOLOGY PAIN MANAGEMENT

**GUPTA, ANUJ**  
*Provider ID: 297703*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 2023 W VISTA WAY STE D VISTA, CA 92083  
 *Phone: (619) 330-8771*  
*Fax: (619) 330-8772*  
 *After Hours Phone: (619) 330-8771*  
*Provider Gender: Male*  
*NPI: 1073629549*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: POMONA*








VALLEY HOSP MED CTR,  
PARADISE VALLEY HOSPITAL,  
TRI CITY MEDICAL CTR  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 16\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

#### CARDIOVASCULAR DISEASE

**ABELHAD, NADIA**  
*Provider ID: 306897*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 1000 VALE TERRACE DR VISTA, CA 92084  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
*Provider Gender: Female*  
*NPI: 1619400801*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT*

PROVIDER  
 *Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

#### CARDIOVASCULAR DISEASE

**ABELHAD, NADIA**  
*Provider ID: 306896*  
*Board Certified Specialty: No COMMUNITY CARE IPA LLC*  
 1000 VALE TERRACE DR VISTA, CA 92084  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
*Provider Gender: Female*  
*NPI: 1619400801*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IHP of Southern Cal-PHP

### **CARDIOVASCULAR DISEASE**

#### **DO, HULBERT**

Provider ID: 290574

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1679733760

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR, Sharp  
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 9AM-8PM  
M-TH 9AM-8PM  
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

#### **SONG, CAROL**

Provider ID: 290550

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1518166685

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 9AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **APRIL, MONIQUE**

Provider ID: 307939

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **CERTIFIED NURSE**

#### **PRACTITIONER**

#### **APRIL, MONIQUE**

Provider ID: 306977

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1093288730

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N




Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

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## D. 专家名录






 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*




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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **APRIL, MONIQUE**

*Provider ID: 306980*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 *134 GRAPEVINE RD*  
*VISTA, CA 92083*  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
*Provider Gender: Female*  
*NPI: 1093288730*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

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### **CERTIFIED NURSE**

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### **PRACTITIONER**

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#### **AYELE, MAHOGANY**

*Provider ID: 257586*  
*Board Certified Specialty: No*  
*BLUE SHIELD PROMISE*  
*HEALTH PLAN DIRECT*

 *1000 VALE TERRACE DR*  
*VISTA, CA 92084*  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
*Provider Gender: Female*  
*NPI: 1902120421*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-8PM*  
*F 8AM-5PM*  
*SA 9AM-4PM*  
 *Website: N/A*  
*IPA: BLUE SHIELD PROMISE*  
*HEALTH PLAN DIRECT*

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### **CERTIFIED NURSE** **PRACTITIONER**


---


#### **AYELE, MAHOGANY**

*Provider ID: 257587*  
*Board Certified Specialty: No*  
*BLUE SHIELD PROMISE*  
*HEALTH PLAN DIRECT*


 *134 GRAPEVINE RD*

*VISTA, CA 92083*


 *Phone: (844) 308-5003*  
*Fax: (760) 414-3763*

 *After Hours Phone: (844) 308-5003*

*Provider Gender: Female*  
*NPI: 1902120421*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8AM-5PM*  
*TU 10:30AM-7:30PM*  
*W-F 8AM-5PM*

 *Website: N/A*

*IPA: BLUE SHIELD PROMISE*  
*HEALTH PLAN DIRECT*

---


### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **BERNETICH, MEGHAN**

*Provider ID: 304506*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*

 *1000 VALE TERRACE DR*  
*VISTA, CA 92084*

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3702*

 *After Hours Phone: (760) 631-5000*

*Provider Gender: Female*  
*NPI: 1629354360*


 *Provider English Spoken: Y*


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## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM  
SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


---

#### **BERNETICH, MEGHAN**

Provider ID: 302526

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3702


 After Hours Phone: (760)  
631-5000


Provider Gender: Female  
NPI: 1629354360

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\24

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM  
SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

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#### **CARDINELL, ANNA**

Provider ID: 291411

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 910 SYCAMORE AVE STE  
270

VISTA, CA 92081

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1306978614

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A  
IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **CHILAKA, SAMUEL**

Provider ID: 301311

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR

VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000


Provider Gender: Male  
NPI: 1679140644

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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#### **CHILAKA, SAMUEL**

Provider ID: 301312

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male  
NPI: 1679140644

 Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### **CERTIFIED NURSE** **PRACTITIONER**


---

**CHRISTY, TYLER**

Provider ID: 303929

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE A  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**CHRISTY, TYLER**

Provider ID: 303932

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**CHRISTY, TYLER**

Provider ID: 303927

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**CHRISTY, TYLER**

Provider ID: 303928

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---

**CHRISTY, TYLER**

Provider ID: 307298

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### CERTIFIED NURSE

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### PRACTITIONER


---

**CORY, ALLISON**

Provider ID: 245207

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1194027706

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM

TU 10:30AM-7:30PM

W-F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC

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### CERTIFIED NURSE PRACTITIONER


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**HALGEDAHL, YI**

Provider ID: 241907

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1619246907

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM  
F 9AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC

---

### CERTIFIED NURSE PRACTITIONER


---

**HARRIS, PAMELA**

Provider ID: 302286

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM  
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**HARRIS, PAMELA**

Provider ID: 303439

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM  
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---


### **CERTIFIED NURSE** **PRACTITIONER**


---

**HARRIS, PAMELA**

Provider ID: 302291

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE A  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


**HARRIS, PAMELA**

Provider ID: 302287

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**HERNANDEZ, JESSICA**

Provider ID: 304492

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---

**HERNANDEZ, JESSICA**

Provider ID: 304493

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1013668680

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---

**HERNANDEZ, JESSICA**

Provider ID: 302296

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1013668680


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---


### CERTIFIED NURSE PRACTITIONER


---

**HERNANDEZ, JESSICA**

Provider ID: 302301

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE A  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1013668680


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---

**HERNANDEZ, JESSICA**

Provider ID: 302297

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1013668680

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): **HUERTA, STEVEN**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---

**HUERTA, STEVEN**

Provider ID: 307931

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1558607440


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---


### CERTIFIED NURSE PRACTITIONER

---

Provider ID: 307933

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1558607440

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


---


**KELLEHER, BRIDGET**

Provider ID: 298085

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

---


### CERTIFIED NURSE PRACTITIONER


---

**KELLEHER, BRIDGET**

Provider ID: 305737

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE B  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

---


### **CERTIFIED NURSE** **PRACTITIONER**


---


**KELLEHER, BRIDGET**

Provider ID: 298083

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY  
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


**KORMANIK, PATRICIA**

Provider ID: 282072

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 910 SYCAMORE AVE STE  
102

VISTA, CA 92081


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093895047

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**MONTGOMERY, KEITH ALLEN**

Provider ID: 295284

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1790978617

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU 8AM-5PM  
W 10AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**MONTGOMERY, KEITH ALLEN**

Provider ID: 295288

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1790978617

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU 8AM-5PM

W 10AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **NICHOLAS, ESTELA**

Provider ID: 239866

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1558384792

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M 8AM-5PM

TU-TH 8AM-8PM

F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **PRITZKER, JOELY**

Provider ID: 239773

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1619384351

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **SRILASAK, MICHELE**

Provider ID: 281857

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 910 SYCAMORE AVE STE  
102

VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265487326

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **TAYLOR, CHRISTOPHER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider ID: 295502  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760)  
631-5000

Provider Gender: Male  
NPI: 1851747166  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-2PM  
SA 9AM-4PM  
Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

**TAYLOR, CHRISTOPHER**  
Provider ID: 295504  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
105 DURIAN ST STE A  
VISTA, CA 92083  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760)

631-5000  
Provider Gender: Male  
NPI: 1851747166  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-2PM  
SA 9AM-4PM  
Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

**TAYLOR, CHRISTOPHER**  
Provider ID: 295507  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
134 GRAPEVINE RD  
VISTA, CA 92083  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760)  
631-5000  
Provider Gender: Male  
NPI: 1851747166  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):

N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-2PM  
SA 9AM-4PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

**YCASAS, EMILY**  
Provider ID: 298837  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1033841861  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-8PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED REGISTERED

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

---

**NURSE MIDWIFE**

**GUIDI, CASEY**  
Provider ID: 303315  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1013349919  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

**CERTIFIED REGISTERED  
NURSE MIDWIFE**

**GUIDI, CASEY**  
Provider ID: 300224  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000

Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1013349919  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

**CHIROPRACTOR**

**CORTEZ, JAIME**  
Provider ID: 290483  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 414-3892  
Fax: (760) 631-5000

After Hours Phone: (760) 414-3892  
Provider Gender: Male  
NPI: 1508195348  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

---

**CHIROPRACTOR**

**JU, NATHANIEL**  
Provider ID: 290222  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
134 GRAPEVINE RD  
VISTA, CA 92083  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Provider Gender: Male  
NPI: 1972883882

Provider English Spoken: Y  
Provider Language(s) Spoken: Chinese  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  
IPA: IHP of Southern Cal-PHP

---

**CHIROPRACTOR**

**JU, NATHANIEL**  
Provider ID: 290220

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

---

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1972883882

🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TH 8AM-8PM  
F 9AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **GYNECOLOGIC ONCOLOGY**

#### **ESKANDER, RAMEZ**

Provider ID: 282163

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 910 SYCAMORE AVE STE  
102

VISTA, CA 92081

☎ Phone: (760) 536-7737

Fax: (760) 536-7959

🕒 After Hours Phone: (760)  
536-7737

Provider Gender: Male

NPI: 1144486929

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, EARL AND  
LORRAINE MILLER

CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,  
Providence St Joseph Hospital,  
Providence St Jude Medical

Center, ORANGE COAST MEM  
MED CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED  
CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED  
CTR, CORONA REGIONAL

MED CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON,

UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **HOSPICE AND PALLIATIVE MEDICINE**

#### **RUBENZI, TAMARA**

Provider ID: 282128

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 910 SYCAMORE AVE STE  
102

VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1811200652

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### **INFECTIOUS DISEASE**

#### **HALPERIN, JASON**

Provider ID: 296420

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 134 GRAPEVINE RD

VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

631-5000

Provider Gender: Male


NPI: 1952626228


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

---

### INTERNAL MEDICINE


---

#### DAO, MARC

Provider ID: 297754

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000


Fax: (760) 414-3763

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1467542175

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French,  
Vietnamese

Cultural Competency: N

Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND

NEWBORNS, EL CENTRO


REGIONAL MEDICAL CENTER,  
PALOMAR HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### INTERNAL MEDICINE


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#### SHABANIAN, LEILA

Provider ID: 307214

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013963073

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi, French  
Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA  
VISTA, TRI CITY MEDICAL CTR,  
PALOMAR HEALTH, SCRIPPS  
MERCY HOSPITAL, PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### INTERNAL MEDICINE


---

#### SHABANIAN, LEILA

Provider ID: 307216

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013963073

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi, French  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, TRI CITY MEDICAL CTR,  
PALOMAR HEALTH, SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

MERCY HOSPITAL, PALOMAR  
 MEDICAL CENTER  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: TU 10:30AM-7:30PM  
 F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### INTERNAL MEDICINE

**SHABANIAN, LEILA**  
 Provider ID: 306766  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 1000 VALE TERRACE DR  
 VISTA, CA 92084  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Female  
 NPI: 1013963073  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi, French  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, TRI CITY MEDICAL CTR,  
 PALOMAR HEALTH, SCRIPPS  
 MERCY HOSPITAL, PALOMAR  
 MEDICAL CENTER

Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY

**PARKS, MONICA**  
 Provider ID: 302414  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 906 SYCAMORE AVE STE  
 104  
 VISTA, CA 92081  
 Phone: (760) 630-2550  
 Fax: (760) 726-2305  
 After Hours Phone: (760)  
 630-2550  
 Provider Gender: Female  
 NPI: 1740634971  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish,  
 Vietnamese  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL,  
 SCRIPPS MEMORIAL  
 HOSPITAL ENCINITAS, TRI  
 CITY MEDICAL CTR  
 Medi-Cal Open Panel: Yes



Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### OBSTETRICS / GYNECOLOGY

**ARRIETA, IRIS**  
 Provider ID: 290607  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
 VISTA, CA 92084  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Female  
 NPI: 1659614303  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY  
 MEDICAL CTR, RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, SHARP MEMORIAL  
 HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 16\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER








了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

 Hours: M-TH 8AM-8PM  
F 9AM-5PM  
SA 9AM-4PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP






### **OBSTETRICS / GYNECOLOGY**

#### **BINDER, PRATIBHA**


Provider ID: 282168  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 910 SYCAMORE AVE STE  
102  
VISTA, CA 92081  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1174758031  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **FRANCIS, LARRY**

Provider ID: 290292  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Male  
NPI: 1215008552  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation:  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SHARP MEMORIAL HOSPITAL,  
POMONA VALLEY HOSP MED  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-8PM  
F 9AM-5PM  
SA 9AM-4PM

 Website: N/A  
IPA: IHP of Southern Cal-PHP


### **OBSTETRICS / GYNECOLOGY**

#### **HAWKINS, MELISSA**

Provider ID: 290596

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3755

 After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1851620447


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

 Website: N/A  
IPA: IHP of Southern Cal-PHP


### **OBSTETRICS / GYNECOLOGY**

#### **LEONARD, LISA**

Provider ID: 290710

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

631-5000  
Provider Gender: Female  
NPI: 1477588598  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 9AM-8PM  
F 9AM-5PM  
SA 9AM-4PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **OPTOMETRIST**

**GEE, JENNIFER**  
Provider ID: 290208  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Female  
NPI: 1336589332  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
COMMUNITY REGIONAL  
MEDICAL CENTER-FRESNO,  
CALIFORNIA PACIFIC  
MEDICAL CENTER - D P APH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-8PM  
F 9AM-5PM  
SA 9AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

**GEE, JENNIFER**  
Provider ID: 290209  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 134 GRAPEVINE RD  
VISTA, CA 92083  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Female  
NPI: 1336589332  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
COMMUNITY REGIONAL  
MEDICAL CENTER-FRESNO,  
CALIFORNIA PACIFIC




MEDICAL CENTER - D P APH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M 8AM-5PM  
TU 9:30AM-5PM  
W 8AM-5PM  
TH 10AM-7PM  
F 8AM-5PM  
SA 9AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

**GEE, JENNIFER**  
Provider ID: 273113  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Female  
NPI: 1336589332  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
COMMUNITY REGIONAL  
MEDICAL CENTER-FRESNO,  
CALIFORNIA PACIFIC  
MEDICAL CENTER - D P APH





了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-8PM  
 F 9AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### **OPTOMETRIST**








#### **GEE, JENNIFER**

Provider ID: 273114  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 134 GRAPEVINE RD  
 VISTA, CA 92083  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Female  
 NPI: 1336589332  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation:  
 COMMUNITY REGIONAL  
 MEDICAL CENTER-FRESNO,  
 CALIFORNIA PACIFIC  
 MEDICAL CENTER - D P A P H  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER  
 Hours: M 8AM-5PM  
 TU 9:30AM-5PM  
 W 8AM-5PM  
 TH 10AM-7PM  
 F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KIM, MICHAEL**

Provider ID: 245239  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 134 GRAPEVINE RD  
 VISTA, CA 92083  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Male  
 NPI: 1164546313  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8AM-5PM  
 TH 10:30AM-7:30PM  
 F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KIM, MICHAEL**

Provider ID: 290697  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 134 GRAPEVINE RD  
 VISTA, CA 92083  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Male  
 NPI: 1164546313  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8AM-5PM  
 TH 10:30AM-7:30PM  
 F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **KIM, MICHAEL**

Provider ID: 290903  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
 VISTA, CA 92084

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 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male  
NPI: 1164546313

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 8AM-5PM  
M-F 8AM-5PM

Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### MORA, WENDY

Provider ID: 290236

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1376958389

Provider English Spoken: Y  
Provider Language(s)

Spoken: Spanish  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### MORA, WENDY

Provider ID: 290238

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1376958389

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1376958389

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### TAM, EMILY









Provider ID: 290316

Board Certified Specialty: No

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## D. 专家名录



### IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
 VISTA, CA 92083  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Female  
 NPI: 1497161236  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Chinese, Mandarin, Yue Chinese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### OPTOMETRIST







### TAM, EMILY




Provider ID: 277978  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 1000 VALE TERRACE DR  
 VISTA, CA 92084  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Female  
 NPI: 1497161236

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Chinese, Mandarin, Yue Chinese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 9AM-4PM  
 M-TH 8AM-8PM  
 F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### OPTOMETRIST









### TAM, EMILY

Provider ID: 290315  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
 VISTA, CA 92084  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Female  
 NPI: 1497161236  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Chinese, Mandarin, Yue Chinese  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: SU 9AM-4PM  
 M-TH 8AM-8PM  
 F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### OPTOMETRIST

### TRAN, JESSICA

Provider ID: 303729  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
 VISTA, CA 92084  
 Phone: (760) 631-5000  
 Fax: (760) 414-3702  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Female  
 NPI: 1457922957  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 5\21  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: Community Care IPA LLC,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IHP of Southern Cal-PHP

### OPTOMETRIST

#### TRAN, JESSICA

Provider ID: 304595

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3702

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### TRAN, JESSICA

Provider ID: 303733

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3702

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### TRAN, JESSICA

Provider ID: 304596

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3702

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### PEDIATRICS

#### RAHIMI, NASSRIN

Provider ID: 257581

Board Certified Specialty: No  
BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1063438166

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER


Hours: M-TH 8AM-8PM

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## D. 专家名录

F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT


### PHYSICIANS ASSISTANT

#### WALLACE, STEPHANIE


Provider ID: 239770

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR  
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (888)  
216-8482

Provider Gender: Female

NPI: 1518104942

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM

TU-TH 8AM-8PM

F 8AM-5PM

SA 9AM-4PM

 Website: N/A


IPA: Community Care IPA LLC


### PODIATRIST

#### MILLER, JULIE

Provider ID: 290666

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3763

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-8PM

F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PODIATRIST


#### MILLER, JULIE

Provider ID: 305464

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


### PULMONARY DISEASES

#### BAUTISTA, JENNIFER

Provider ID: 300864

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 2067 W VISTA WAY STE 160  
VISTA, CA 92083

 Phone: (760) 230-8994


Fax: (760) 944-1309

 After Hours Phone: (760)  
230-8994

Provider Gender: Female

NPI: 1770727034




 Provider English Spoken: Y

 Provider Language(s)





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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录






*Spoken: Tagalog*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, NATIVIDAD MEDICAL CENTER*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 21\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*




### **REGISTERED PHYSICAL THERAPIST**

**AMBROSE, CHRISTOPHER**  
*Provider ID: 248009*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 2067 W VISTA WAY STE 185 VISTA, CA 92083  
 *Phone: (760) 631-5888*  
*Fax: (760) 631-5880*  
 *After Hours Phone: (760) 591-7750*  
*Provider Gender: Male*  
*NPI: 1114977535*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*






*Min/Max Age: 8\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 7AM-7PM TU 7AM-5PM W 7AM-7PM TH 7AM-5PM F 7AM-7PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*

### **RHEUMATOLOGY**

**AL NAHLAWI, BASMA**  
*Provider ID: 306869*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 2095 W VISTA WAY STE 216 VISTA, CA 92083  
 *Phone: (760) 736-8091*  
*Fax: (760) 736-8092*  
 *After Hours Phone: (760) 736-8091*  
*Provider Gender: Female*  
*NPI: 1144455262*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic*  
*Cultural Competency: N*  
*Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR MURRIETA, PALOMAR MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### **SURGERY GENERAL**

**ARMANI, AVA**  
*Provider ID: 282144*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 910 SYCAMORE AVE STE 102 VISTA, CA 92081  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1861759383*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: MEDICAL CTR AT UCSF, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*









了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### SURGERY GENERAL

#### **GROVE, JAY**

Provider ID: 245227  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 2385 S MELROSE DR  
VISTA, CA 92081  
 Phone: (760) 300-3647  
Fax: (760) 482-1316  
 After Hours Phone: (760)  
300-3647  
Provider Gender: Male  
NPI: 1912971334  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PALOMAR  
HEALTH, PALOMAR MEDICAL  
CENTER, TRI CITY MEDICAL  
CTR, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: Community Care IPA LLC

### **WILDOMAR**









### ANESTHESIOLOGY

#### **HYLTON, DIANA**

Provider ID: 241737  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1932527751  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### ANESTHESIOLOGY

#### **KRAUSE, MARTIN**

Provider ID: 287654  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595  
 Phone: (951) 677-1111  
Fax: (951) 677-9757  
 After Hours Phone: (951)  
677-1111  
Provider Gender: Male  
NPI: 1417243239  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group





### ANESTHESIOLOGY CRITICAL CARE MEDICINE




#### **RODRIGUEZ-MINETTE, JESSICA**

Provider ID: 275308  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录





 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1164809950  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes




Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **LI, JINGHONG**

Provider ID: 255940  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595  
 Phone: (951) 677-1111  
 After Hours Phone: (951)  
677-1111  
Provider Gender: Female  
NPI: 1619014479  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY



THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### **INTERNAL MEDICINE CRITICAL CARE MEDICINE**

#### **CHEN, KENNETH**

Provider ID: 283131  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595  
 Phone: (951) 677-1111  
Fax: (951) 677-9757  
 After Hours Phone: (951)  
677-1111  
Provider Gender: Male  
NPI: 1720472657

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A


IPA: UCSD Medical Group

### **INTERNAL MEDICINE CRITICAL CARE MEDICINE**


#### **PATEL, SAGAR**

Provider ID: 283000  
Board Certified Specialty: No  
UCSD MEDICAL GROUP




 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595  
 Phone: (951) 677-1111  
Fax: (951) 677-9757

 After Hours Phone: (951)  
677-1111

Provider Gender: Male  
NPI: 1245672302

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **INTERNAL MEDICINE CRITICAL CARE MEDICINE**

#### **TRAN, LINH**

Provider ID: 202658

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR  
WILDOMAR, CA 92595

Phone: (951) 677-1111

After Hours Phone: (951)  
677-1111

Provider Gender: Female

NPI: 1851682728

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

677-1111

Provider Gender: Female

NPI: 1750745394

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### **PULMONARY DISEASES**

#### **SURI, RAJAT**

Provider ID: 283349

Board Certified Specialty: No

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR  
WILDOMAR, CA 92595

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)  
677-1111

Provider Gender: Male

NPI: 1144615337

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### **PULMONARY DISEASES**

#### **KUMAR, AVNEE**

Provider ID: 300013

Board Certified Specialty: No

UCSD MEDICAL GROUP

36485 INLAND VALLEY DR  
WILDOMAR, CA 92595

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)

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## E. 医院目录 - 综合急症护理医院

### ALVARADO HOSPITAL LLC

Provider ID: 170056

6655 ALVARADO RD  
SAN DIEGO, CA 92120

Phone: (619) 287-3270

After Hours Phone: (619)  
287-3270

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: M-F 8AM-4:30PM

NPI: 1265468946

Website: [www.alvaradohospital.com](http://www.alvaradohospital.com)

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)  
740-6000

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7  
days/week

License Number: 080000006

NPI: 1528041811

Website: [www.sharp.com/hospitals/grossmont/](http://www.sharp.com/hospitals/grossmont/)

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Birthing Friendly: Y

### KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD  
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)  
543-4500

Accepting New Patients: No

Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7  
days/week

NPI: 1992880512

Website: N/A

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD  
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)  
613-4000

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7  
days/week

License Number: 080000127

NPI: 1376513754

Website: [www.palomarhealth.org/facilities/palomar-poway-outpatient](http://www.palomarhealth.org/facilities/palomar-poway-outpatient)

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Birthing Friendly: Y

### PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)  
281-5000

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO


Hours: 24 Hours / 7  
days/week

License Number: 080000083

NPI: 1457321317

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## E. 医院目录 - 综合急症护理医院

 Website: [www.palomarhealth.org/facilities/palomar-medical-center](http://www.palomarhealth.org/facilities/palomar-medical-center)


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER

### PARADISE VALLEY HOSPITAL

Provider ID: 170057

 2400 E 4TH ST  
NATIONAL CITY, CA 91950


 Phone: (619) 470-4321

 After Hours Phone: (619) 470-4321

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N


Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

NPI: 1356410351

 Website: [www.paradisevallyhospital.net](http://www.paradisevallyhospital.net)


American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700


 After Hours Phone: (858)

576-1700

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

NPI: 1710065933

 Website: [www.rchsd.org](http://www.rchsd.org)


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER

### SCRIPPS GREEN HOSPITAL

Provider ID: 171084

 10666 N TORREY PINES RD  
MS 220  
LA JOLLA, CA 92037


 Phone: (858) 455-9100

 After Hours Phone: (858) 455-9100

Accepting New Patients: No  
Min/Max Age: 0\None


Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

License Number: 080000139

NPI: 1841233780

 Website: [www.scripps.org/locations/hospitals\\_\\_scripps-green-hospital](http://www.scripps.org/locations/hospitals__scripps-green-hospital)


American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

### SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045

 9888 GENESEE AVE  
LA JOLLA, CA 92037


 Phone: (800) 727-4777

 After Hours Phone: (800) 727-4777

Accepting New Patients: No  
Min/Max Age: 0\None


Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:

 Hours: 24 Hours / 7  
days/week

License Number: 080000050

NPI: 1841277704

 Website: [www.scripps.org/locations/hospitals\\_\\_scripps-memorial-hospital-la-jolla](http://www.scripps.org/locations/hospitals__scripps-memorial-hospital-la-jolla)

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

### SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305


 354 SANTA FE DR  
ENCINITAS, CA 92024

 Phone: (760) 753-6501

 After Hours Phone: (760)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## E. 医院目录 - 综合急症护理医院

753-6501  
Accepting New Patients: No  
Min/Max Age: 0\None  
 Site English Spoken: Y  
Cultural Competency: N  
Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

License Number: 080000148  
NPI: 1700829199

 Website: [www.scripps.org/locations/hospitals\\_\\_scripps-memorial-hospital-encinitas](http://www.scripps.org/locations/hospitals__scripps-memorial-hospital-encinitas)

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Birth Friendly: Y

### SCRIPPS MERCY HOSPITAL

Provider ID: 170048

 4077 5TH AVE  
SAN DIEGO, CA 92103


 Phone: (619) 294-8111

 After Hours Phone: (619)  
294-8111

Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

NPI: 1659359446

 Website: [www.scripps.org/](http://www.scripps.org/)

ocations/hospitals\_\_scripps-mercy-hospital\_\_scripps-mercy-hospital-san-diego

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Birth Friendly: Y

### SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256

 435 H ST  
CHULA VISTA, CA 91910


 Phone: (619) 691-7000

 After Hours Phone: (619)  
691-7000


Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

License Number: 090000074  
NPI: 1659359446

 Website: [www.scripps.org/locations/hospitals\\_\\_scripps-mercy-hospital\\_\\_scripps-mercy-hospital-chula-vista](http://www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista)


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### SELECT SPECIALTY HOSPITAL SAN DIEGO

Provider ID: 170165

 555 WASHINGTON ST  
SAN DIEGO, CA 92103


 Phone: (619) 260-8300

 After Hours Phone: (619)  
260-8300

Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

License Number: 090000404  
NPI: 1639172133

 Website: N/A


American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

### SHARP CHULA VISTA MED CTR

Provider ID: 170251

 751 MEDICAL CENTER CT  
CHULA VISTA, CA 91911

 Phone: (619) 502-5800

 After Hours Phone: (619)  
502-5800

Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## E. 医院目录 - 综合急症护理医院

 Hours: 24 Hours / 7 days/week

License Number: 090000008

NPI: 1396728630

 Website: [www.sharp.com/hospitals/chula-vista/](http://www.sharp.com/hospitals/chula-vista/)

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Birthing Friendly: Y

### SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252

 250 PROSPECT PL  
CORONADO, CA 92118

 Phone: (619) 522-3600

 After Hours Phone: (619) 522-3600

Accepting New Patients: No


Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7 days/week

NPI: 1154304475

 Website: [www.sharp.com/hospitals/coronado/](http://www.sharp.com/hospitals/coronado/)

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


### SHARP MARY BIRCH HOSP FOR WOMEN AND

### NEWBORNS

Provider ID: 170054

 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

 Phone: (858) 939-3400

 After Hours Phone: (858) 939-3400

Accepting New Patients: No


Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 080000039

NPI: 1407839921

 Website: [www.sharp.com](http://www.sharp.com)

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

### SHARP MEMORIAL HOSPITAL

Provider ID: 170047

 7901 FROST ST  
SAN DIEGO, CA 92123

 Phone: (858) 939-3400

 After Hours Phone: (858) 939-3400

Accepting New Patients: No


Min/Max Age: 0\None

 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7 days/week

NPI: 1407839921

 Website: [www.sharp.com/hospitals/memorial/](http://www.sharp.com/hospitals/memorial/)

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Birthing Friendly: Y

### TRI CITY MEDICAL CTR

Provider ID: 170049

 4002 VISTA WAY  
OCEANSIDE, CA 92056

 Phone: (760) 724-8411

 After Hours Phone: (760) 724-8411

Accepting New Patients: No


Min/Max Age: 0\None

 Site English Spoken: Y


Cultural Competency: N

Hospital Accreditation Status:

JCAHO

 Hours: 24 Hours / 7 days/week

NPI: 1801861190

 Website: [www.tricitymed.org](http://www.tricitymed.org)

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

### UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053








 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

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## E. 医院目录 - 综合急症护理医院

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 Phone: (858) 657-7000 N  
 After Hours Phone: (858) 657-7000  Accessibility: CONTACT PROVIDER  
Accepting New Patients: No Birthing Friendly: Y  
Min/Max Age: 0\None  
 Site English Spoken: Y  
Cultural Competency: N  
Hospital Accreditation Status:  
 Hours: 24 Hours / 7 days/week  
License Number: 090000101  
NPI: 1497021265  
 Website: N/A  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### UCSD MEDICAL CTR

Provider ID: 170051  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (619) 543-6222  
 After Hours Phone: (619) 543-6222  
Accepting New Patients: No  
Min/Max Age: 0\None  
 Site English Spoken: Y  
Cultural Competency: N  
Hospital Accreditation Status:  
 Hours: 24 Hours / 7 days/week  
License Number: 090000101  
NPI: 1184722779  
 Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

### CARLSBAD

#### LA COSTA HOUSE

Provider ID: 662923

6433 FLAMENCO ST  
CARLSBAD, CA 92009

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No  
NPI: 1962488007

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHULA VISTA

#### BIRCH PATRICK CONV CTR

Provider ID: 171998

751 MEDICAL CENTER CT  
CHULA VISTA, CA 91911

Phone: (619) 502-3600

Fax: (619) 502-5835

After Hours Phone: (619)  
502-3600

Accepting New Patients: No  
NPI: 1538142369

Website: [www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm](http://www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### SOUTH BAY POST ACUTE CARE

Provider ID: 394308

553 F ST  
CHULA VISTA, CA 91910

Phone: (619) 426-8611

Fax: (619) 240-7378

After Hours Phone: (619)  
426-8611

Accepting New Patients: No  
Hours: M-F 9AM-5:30PM  
NPI: 1376946277

Website: <http://southbaypostacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Site Languages(s) Spoken:  
Spanish, Filipino, Pilipino  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CORONADO

#### VILLA CORONADO CONVALESCENT

Provider ID: 172644

233 PROSPECT PL

CORONADO, CA 92118

Phone: (619) 552-3900

Fax: (619) 522-3939

After Hours Phone: (619)  
552-3900

Accepting New Patients: No  
NPI: 1184607418

Website: [www.sharp.com/hospitals/coronado/departments/long-term-care.cfm](http://www.sharp.com/hospitals/coronado/departments/long-term-care.cfm)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### EL CAJON

#### AVOCADO POST ACUTE

Provider ID: 171985

510 E WASHINGTON AVE  
EL CAJON, CA 92020

Phone: (619) 440-1211

Fax: (619) 956-3929

After Hours Phone: (619)  
440-1211

Accepting New Patients: No  
NPI: 1568484517


Website: [www.avacadopostacute.com](http://www.avacadopostacute.com)

Credentials and/or  
certifications:






Site English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## F. 专业护理机构


American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### COTTONWOOD CANYON HEALTHCARE CENTER






Provider ID: 171983  
 1391 E MADISON AVE  
EL CAJON, CA 92021  
 Phone: (619) 444-1107  
Fax: (619) 444-1403  
 After Hours Phone: (619)  
444-1107  
Accepting New Patients: No  
NPI: 1013953199  
 Website: <http://cottonwoodcanyonhc.com>  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853  
 1580 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 441-8745  
 After Hours Phone: (619)  
441-8745  
Accepting New Patients: No  
NPI: 1700973963  
 Website: [www.countryhills.c](http://www.countryhills.c)






om  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
American Sign Language,  
Arabic, Korean, Spanish,  
Tagalog, Farsi, Vietnamese,  
Mandarin  
Cultural Competency: N  
American Sign Language (ASL):  
Y  
 Accessibility: CONTACT  
PROVIDER

### COUNTRY HILLS POST ACUTE






Provider ID: 503510  
 1580 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 441-8745  
Fax: (619) 441-9029  
 After Hours Phone: (619)  
441-8745  
Accepting New Patients: No  
NPI: 1063974285  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

 1340 E MADISON AVE  
EL CAJON, CA 92021  
 Phone: (619) 447-1020  
Fax: (619) 447-1024  
 After Hours Phone: (619)  
447-1020  
Accepting New Patients: No  
NPI: 1346516937  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### MAGNOLIA POST ACUTE CARE

Provider ID: 380518  
 635 S MAGNOLIA AVE  
EL CAJON, CA 92020  
 Phone: (616) 442-8826  
Fax: (619) 442-0288  
 After Hours Phone: (616)  
442-8826  
Accepting New Patients: No  
NPI: 1316340227  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish, Tagalog  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

### PROVIDER

#### PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923

444 W LEXINGTON AVE  
EL CAJON, CA 92020

Phone: (619) 442-7744

After Hours Phone: (619)  
442-7744

Accepting New Patients: No  
NPI: 1447653340

Website: <http://parksidehealth.net>

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

1201 S ORANGE AVE  
EL CAJON, CA 92020

Phone: (619) 441-1988

Fax: (619) 441-7416

After Hours Phone: (619)  
441-1988

Accepting New Patients: No  
NPI: 1285061085

Website: <http://sdpostacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### SOMERSET SUBACUTE AND CARE

Provider ID: 348526

151 CLAYDELLE AVE  
EL CAJON, CA 92020

Phone: (619) 442-0245

Fax: (614) 423-3631

After Hours Phone: (619)  
442-0245

Accepting New Patients: No  
NPI: 1073916987

Website: <http://sometersubacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### THE BRADLEY COURT

Provider ID: 419158

675 E BRADLEY AVE  
EL CAJON, CA 92021

Phone: (619) 448-6633

Fax: (619) 448-5462

After Hours Phone: (619)  
448-6633

Accepting New Patients: No  
NPI: 1629129267

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### VICTORIA POST ACUTE CARE

Provider ID: 387720

654 S ANZA ST  
EL CAJON, CA 92020

Phone: (619) 440-5005

After Hours Phone: (619)  
440-5005

Accepting New Patients: No  
NPI: 1326441239

Website: <http://victoriapostacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### VICTORIA POST ACUTE CARE

Provider ID: 387720


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## F. 专业护理机构

 654 S ANZA ST  
EL CAJON, CA 92020  
 Phone: (619) 440-5005  
 After Hours Phone: (619)  
440-5005

Accepting New Patients: No  
NPI: 1326441239



 Website: [www.VICTORIAPOSTACUTE.com](http://www.VICTORIAPOSTACUTE.com)  
Credentials and/or  
certifications:

 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


### VILLA LAS PALMAS HEALTHCARE CTR


Provider ID: 172020

 622 S ANZA ST  
EL CAJON, CA 92020  
 Phone: (619) 442-0544  
 After Hours Phone: (619)  
442-0544

Accepting New Patients: No  
NPI: 1023048295

 Website: <http://villalaspalmascares.com>  
Credentials and/or  
certifications:




 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## ENCINITAS

### AVIARA HEALTHCARE CENTER



Provider ID: 171995

 944 REGAL RD  
ENCINITAS, CA 92024  
 Phone: (760) 944-0331  
 After Hours Phone: (760)  
944-0331

Accepting New Patients: No  
NPI: 1518146620

 Website: <http://aviarahealthcare.com>

Credentials and/or  
certifications:



 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Tagalog, Spanish  
Cultural Competency: N


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977

 900 SANTA FE DR  
ENCINITAS, CA 92024  
 Phone: (760) 753-6423  
Fax: (760) 753-4979



 After Hours Phone: (760)  
753-6423

Accepting New Patients: No  
 Hours: M-F 8AM-5PM

NPI: 1265415749

 Website: [www.covenantcare.com](http://www.covenantcare.com)

Credentials and/or  
certifications:



 Site English Spoken: Y  
 Site Language(s) Spoken:  
Spanish

Cultural Competency: N  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

### THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER


Provider ID: 172000


 211 SAXONY RD  
ENCINITAS, CA 92024  
 Phone: (760) 632-0081

Fax: (760) 516-2016

 After Hours Phone: (760)  
632-0081

Accepting New Patients: No

 Hours: M-F 7AM-4PM  
NPI: 1659482032

 Website: N/A  
Credentials and/or  
certifications:

 Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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## F. 专业护理机构

### ESCONDIDO

#### ESCONDIDO CARE CENTER

Provider ID: 172027

421 E MISSION AVE  
ESCONDIDO, CA 92025

Phone: (760) 747-0430

Fax: (760) 747-0569

After Hours Phone: (760)  
747-0430

Accepting New Patients: No

Hours: M-F 8AM-4:30PM

NPI: 1588660765

Website: <http://escondidopostacute.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

1980 FELICITA RD  
ESCONDIDO, CA 92025

Phone: (760) 741-6109

After Hours Phone: (760)  
741-6109

Accepting New Patients: No

NPI: 1386681286

Website: <http://lifecarecenterofescondido.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### PALOMAR HEIGHTS CARE CTR

Provider ID: 170055

1260 E OHIO AVE  
ESCONDIDO, CA 92027

Phone: (760) 746-1100

After Hours Phone: (760)  
746-1100

Accepting New Patients: No

NPI: 1255337440

Website: <http://palomarheightsrehab.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988

201 N FIG ST  
ESCONDIDO, CA 92025

Phone: (760) 746-0303

Fax: (760) 738-1749

After Hours Phone: (760)

746-0303

Accepting New Patients: No

NPI: 1861491490

Website: <http://palomarvista.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### VALLE VISTA POST ACUTE

Provider ID: 171968

1025 W 2ND AVE  
ESCONDIDO, CA 92025

Phone: (760) 745-1842

Fax: (760) 745-4346

After Hours Phone: (760)  
745-1842

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1659369262

Website: [www.covenantcare.com](http://www.covenantcare.com)

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

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## F. 专业护理机构

### FALLBROOK

#### FALLBROOK SKILLED NURSING

Provider ID: 298744

325 POTTER ST  
FALLBROOK, CA 92028

Phone: (760) 728-2330

Fax: (909) 863-4644

After Hours Phone: (760)  
728-2330

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1265823264

Website: [www.progressivecarecenters.com](http://www.progressivecarecenters.com)

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR  
FALLBROOK, CA 92028

Phone: (760) 547-1976

Fax: (760) 721-9872

After Hours Phone: (760)  
547-1976

Accepting New Patients: No

NPI: 1962488007

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### LA JOLLA

#### LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

2552 TORREY PINES RD  
LA JOLLA, CA 92037

Phone: (858) 453-5810

Fax: (858) 214-1212

After Hours Phone: (858)  
453-5810

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1457486078

Website: [www.covenantcare.com](http://www.covenantcare.com)

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### THE COVE AT LA JOLLA

Provider ID: 305514

7160 FAY AVE

LA JOLLA, CA 92037

Phone: (858) 459-4361

After Hours Phone: (858)  
459-4361

Accepting New Patients: No

Hours: M-F 7:30AM-4PM

NPI: 1588067482

Website: <http://thecoveatlajolla.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### LA MESA

#### ARBOR HILLS NURSING CENTER

Provider ID: 172007

7800 PARKWAY DR  
LA MESA, CA 91942

Phone: (619) 460-2330

After Hours Phone: (619)  
460-2330

Accepting New Patients: No

NPI: 1356345706

Website: [www.lifegen.net/arborhills/](http://www.lifegen.net/arborhills/)

Credentials and/or

certifications:

Site English Spoken: Y



























Site Languages(s) Spoken:  
Tagalog, Spanish, Russian

Cultural Competency: N

American Sign Language (ASL):

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## F. 专业护理机构


- N**  
 *Accessibility: CONTACT PROVIDER*
- CARE MERIDIAN LA MESA**  
Provider ID: 173379  
 5640 AZTEC DR  
LA MESA, CA 91942  
 Phone: (949) 263-6632  
Fax: (619) 465-0019  
 After Hours Phone: (949) 263-6632  
Accepting New Patients: No  
NPI: 1235404674  
 Website: [www.neurorestorative.com](http://www.neurorestorative.com)  
Credentials and/or certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N  
 *Accessibility: CONTACT PROVIDER*
- COUNTRY MANOR LA MESA HEALTHCARE CENTER**  
Provider ID: 172023  
 5696 LAKE MURRAY BLVD  
LA MESA, CA 91942  
 Phone: (619) 460-7871  
 After Hours Phone: (619) 460-7871  
Accepting New Patients: No  
NPI: 1457345001  
 Website: [countrymanorlamesa.com](http://countrymanorlamesa.com)  
Credentials and/or
- certifications:*  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N  
 *Accessibility: CONTACT PROVIDER*
- GROSSMONT HOSPITAL DP SNF**  
Provider ID: 172643  
 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942  
 Phone: (619) 740-4110  
 After Hours Phone: (619) 740-4110  
Accepting New Patients: No  
NPI: 1417930249  
 Website: [www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm](http://www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm)  
Credentials and/or certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N  
 *Accessibility: CONTACT PROVIDER*
- GROSSMONT POST ACUTE CARE**  
Provider ID: 310488  
 8787 CENTER DR  
LA MESA, CA 91942  
 Phone: (619) 460-4444  
Fax: (619) 713-5116
-  After Hours Phone: (619) 460-4444  
Accepting New Patients: No  
NPI: 1689077588  
 Website: <http://grossmontpostacute.com>  
Credentials and/or certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N  
 *Accessibility: CONTACT PROVIDER*
- HILLDALE HABILITATION CENTER**  
Provider ID: 527671  
 7979 LA MESA BLVD  
LA MESA, CA 91942  
 Phone: (619) 465-8010  
Fax: (619) 465-8348  
 After Hours Phone: (619) 465-8010  
Accepting New Patients: No  
 Hours: M-F 8AM-5PM  
NPI: 1073736427  
 Website: N/A  
Credentials and/or certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N  
 *Accessibility: CONTACT PROVIDER*
- LA MESA HEALTHCARE CTR**


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## F. 专业护理机构

Provider ID: 172022

 3780 MASSACHUSETTS AVE  
LA MESA, CA 91941

 Phone: (619) 465-1313

Fax: (619) 465-8429

 After Hours Phone: (619) 465-1313

Accepting New Patients: No

NPI: 1003852666

 Website: <http://lamesahealthcare.com>

Credentials and/or certifications:


 Site English Spoken: Y  
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### PARKWAY HILLS NURSING & REHAB

Provider ID: 417047


 7760 PARKWAY DR  
LA MESA, CA 91942

 Phone: (619) 469-0124

Fax: (619) 828-7654

 After Hours Phone: (619) 469-0124

Accepting New Patients: No


 Hours: M-TH 9AM-5PM  
F 5AM-5PM

NPI: 1174926448

 Website: N/A  
Credentials and/or

certifications:

 Site English Spoken: Y

 Site Languages(s) Spoken: Farsi, Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

### LEMON GROVE

#### BELLA VISTA HEALTH CENTER

Provider ID: 419062

 7922 PALM ST  
LEMON GROVE, CA 91945


 Phone: (619) 644-1000

Fax: (619) 797-2920

 After Hours Phone: (619) 644-1000

Accepting New Patients: No

NPI: 1760709687

 Website: [www.bellavistahealth.com](http://www.bellavistahealth.com)

Credentials and/or certifications:

 Site English Spoken: Y  
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


#### LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

 8351 BROADWAY  
LEMON GROVE, CA 91945


 Phone: (619) 463-0294

Fax: (619) 461-1064

 After Hours Phone: (619) 463-0294

Accepting New Patients: No

NPI: 1336134204

 Website: <http://lemongrovecare.com>

Credentials and/or certifications:

 Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


### NATIONAL CITY

#### CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978


 541 S V AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 791-7900

 After Hours Phone: (619) 791-7900

Accepting New Patients: No

NPI: 1497759856

 Website: [www.lifegen.net/castlemanor/index.html](http://www.lifegen.net/castlemanor/index.html)

Credentials and/or certifications:

 Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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## F. 专业护理机构

### FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE  
NATIONAL CITY, CA 91950

Phone: (619) 791-7700

Fax: (619) 791-7791

After Hours Phone: (619)  
791-7700

Accepting New Patients: No

Hours: M-F 9AM-5PM

NPI: 1235133687

Website: [www.lifegen.net/friendshipmanor/](http://www.lifegen.net/friendshipmanor/)  
Credentials and/or

certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

2575 E 8TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 470-6700

After Hours Phone: (619)  
470-6700

Accepting New Patients: No

NPI: 1275513293

Website: <http://pvhcc.com>  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

220 E 24TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 474-6741

Fax: (619) 474-1925

After Hours Phone: (619)  
474-6741

Accepting New Patients: No

NPI: 1730176538

Website: [www.windsorcare.com](http://www.windsorcare.com)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

## OCEANSIDE

### LA PALOMA HEALTHCARE CTR

Provider ID: 172021

3232 THUNDER DR  
OCEANSIDE, CA 92056

Phone: (760) 724-2193

After Hours Phone: (760)

724-2193

Accepting New Patients: No

NPI: 1265462436

Website: [WWW.LAPALOMAHEALTHCARE.COM](http://WWW.LAPALOMAHEALTHCARE.COM)

Credentials and/or  
certifications:

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish, Armenian, Korean,  
Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### MCNEALY HOUSE

Provider ID: 662925

4602 ALLENDE AVE  
OCEANSIDE, CA 92057

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No

NPI: 1962488007

Website: N/A  
Credentials and/or

certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER


### MICHALOWSKI HOME

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

Provider ID: 662925


 4602 ALLENDE AVE  
OCEANSIDE, CA 92057

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)  
721-1706

Accepting New Patients: No  
NPI: 1962488007

 Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

### POWAY


#### BOULDER CREEK POST ACUTE

Provider ID: 276987


 12696 MONTE VISTA RD  
POWAY, CA 92064


 Phone: (858) 487-6242

Fax: (858) 487-4282

 After Hours Phone: (858)  
487-6242

Accepting New Patients: No

 Hours: M-F 8AM-5:30PM  
NPI: 1073902672

 Website: [http://bouldercre  
ekpa.com](http://bouldercre<br/>ekpa.com)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

#### POWAY HEALTHCARE CENTER

Provider ID: 171989

 15632 POMERADO RD  
POWAY, CA 92064

 Phone: (858) 485-5153

Fax: (858) 485-7694

 After Hours Phone: (858)  
485-5153

Accepting New Patients: No  
NPI: 1407035512

 Website: [http://powaycare.  
com](http://powaycare.<br/>com)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N


American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

#### THE VILLAS AT POWAY


Provider ID: 172642

 15615 POMERADO RD  
POWAY, CA 92064

 Phone: (858) 613-4545

 After Hours Phone: (858)  
613-4545

Accepting New Patients: No  
NPI: 1619947090

 Website: [www.palomarheal  
th.org/skilled-nursing/villa](http://www.palomarheal<br/>th.org/skilled-nursing/villa)

- pomerado  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


### SAN DIEGO

#### ACCESS TO INDEPENDENCE

Provider ID: 417267

 8885 RIO SAN DIEGO DR  
STE 131

SAN DIEGO, CA 92108

 Phone: (619) 293-3500

Fax: (619) 704-2054

 After Hours Phone: (619)  
293-3500

Accepting New Patients: No

 Hours: M-F 8AM-5PM

NPI: 1083039861

 Website: N/A

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER






#### ARROYO VISTA NURSING CTR

Provider ID: 172028





 3022 45TH ST  
SAN DIEGO, CA 92105

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构






 Phone: (619) 283-5855  
Fax: (619) 284-6327  
 After Hours Phone: (619) 283-5855  
Accepting New Patients: No  
 Hours: SU-SA 9AM-5PM  
NPI: 1487640066  
 Website: <http://arroyovistacare.com>  
Credentials and/or certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Mandarin, Spanish, Vietnamese, Arabic, Tagalog  
Cultural Competency: N  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### BALBOA NURSING AND REHAB CTR

Provider ID: 416840  
 3520 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 291-5270  
 After Hours Phone: (619) 291-5270  
Accepting New Patients: No  
NPI: 1578521274  
 Website: <http://balboahc.com>  
Credentials and/or certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken:


Mandarin, Spanish, Tagalog, Vietnamese  
Cultural Competency: N  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### BRIGHTON PLACE SAN DIEGO






Provider ID: 402624  
 1350 EUCLID AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 263-2166  
 After Hours Phone: (619) 263-2166  
Accepting New Patients: No  
NPI: 1346258274  
 Website: N/A  
Credentials and/or certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

Provider ID: 171971  
 11895 AVENUE OF INDUSTRY  
SAN DIEGO, CA 92128  
 Phone: (858) 673-0101  
Fax: (858) 673-8320  
 After Hours Phone: (858) 673-0101  
Accepting New Patients: No

NPI: 1083727093  
 Website: <http://carmelmountain.net>  
Credentials and/or certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese  
Cultural Competency: N  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### GOLDEN HILL POST ACUTE

Provider ID: 614821  
 1201 34TH ST  
SAN DIEGO, CA 92102  
 Phone: (619) 232-2946  
Fax: (619) 702-7358  
 After Hours Phone: (619) 232-2946  
Accepting New Patients: No  
NPI: 1598229437  
 Website: N/A  
Credentials and/or certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Tagalog  
Cultural Competency: N  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## F. 专业护理机构

### HILLCREST HEIGHTS HEALTHCARE CENTER

Provider ID: 509489

4033 6TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 297-4086  
Fax: (619) 297-9238

After Hours Phone: (619)  
297-4086

Accepting New Patients: No

Hours: M-F 8AM-5PM  
NPI: 1558825067

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### JACOB HEALTH CARE CENTER LLC

Provider ID: 172617

4075 54TH ST  
SAN DIEGO, CA 92105

Phone: (619) 582-5168  
Fax: (619) 325-0194

After Hours Phone: (619)  
582-5168

Accepting New Patients: No  
NPI: 1881684900

Website: [www.jacobhealthcare.com](http://www.jacobhealthcare.com)  
Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### MISSION HILLS POST ACUTE CARE

Provider ID: 339053

3680 REYNARD WAY  
SAN DIEGO, CA 92103

Phone: (619) 297-4484  
Fax: (855) 214-6992

After Hours Phone: (619)  
297-4484

Accepting New Patients: No  
NPI: 1669875563

Website: <http://missionhillspostacute.com>  
Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### RADY CHILDRENS

### CONVALESCENT HOSPITAL

Provider ID: 172200

8022 BIRMINGHAM DR  
SAN DIEGO, CA 92123

Phone: (858) 966-5833  
Fax: (858) 966-8558

After Hours Phone: (858)  
966-5833

Accepting New Patients: No  
NPI: 1992881478

Website: [www.rchsd.org](http://www.rchsd.org)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST  
SAN DIEGO, CA 92139

Phone: (619) 475-2211  
Fax: (619) 479-9126

After Hours Phone: (619)  
475-2211

Accepting New Patients: No  
NPI: 1255499174

Website: <http://reovista.com>  
Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

### ST PAULS HEALTH CARE CENTER

Provider ID: 288531

235 NUTMEG ST  
SAN DIEGO, CA 92103

Phone: (619) 677-3895

After Hours Phone: (619)  
677-3895

Accepting New Patients: No  
NPI: 1972619104

Website: N/A  
Credentials and/or

certifications: CMS

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### THE PAVILION AT OCEAN POINT

Provider ID: 262151

3202 DUKE ST  
SAN DIEGO, CA 92110

Phone: (619) 224-4141

After Hours Phone: (619)  
224-4141

Accepting New Patients: No  
NPI: 1538174990

Website: N/A  
Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008

3884 NOBEL DR  
SAN DIEGO, CA 92122

Phone: (858) 625-8700

Fax: (858) 625-8777

After Hours Phone: (858)  
625-8700

Accepting New Patients: No  
NPI: 1003198342

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### UNIVERSITY CARE CENTER

Provider ID: 172024

5602 UNIVERSITY AVE  
SAN DIEGO, CA 92105

Phone: (619) 583-1993

Fax: (619) 501-3559

After Hours Phone: (619)  
583-1993

Accepting New Patients: No  
NPI: 1871522672

Website: <http://universitycarecenter.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Mandarin,  
Russian, Vietnamese, Farsi,  
Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

15720 BERNARDO CENTER  
DR

SAN DIEGO, CA 92127

Phone: (858) 672-3900

Fax: (858) 672-9247

After Hours Phone: (858)  
672-3900

Accepting New Patients: No  
NPI: 1518063437

Website: [www.villaranchobernardo.com](http://www.villaranchobernardo.com)

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N






Accessibility: CONTACT  
PROVIDER

### WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL





Provider ID: 172012


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构




 1201 34TH ST  
SAN DIEGO, CA 92102  
 Phone: (619) 232-2946  
Fax: (310) 595-3529  
 After Hours Phone: (619)  
232-2946  
Accepting New Patients: No  
NPI: 1811963028  
 Website: <https://windsorgoIdenhill.com>  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish, Tagalog  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### SAN MARCOS

**CARLO HOUSE**  
Provider ID: 662931  
 411 CARLO ST  
SAN MARCOS, CA 92078  
 Phone: (760) 721-1706  
Fax: (760) 721-9872  
 After Hours Phone: (760)  
721-1706  
Accepting New Patients: No  
NPI: 1962488007  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):



N  
 Accessibility: CONTACT  
PROVIDER




### SANTEE STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994  
 8778 CUYAMACA ST  
SANTEE, CA 92071  
 Phone: (619) 449-5555  
 After Hours Phone: (619)  
449-5555  
Accepting New Patients: No  
 Hours: SU-SA 8AM-5PM  
NPI: 1184628554  
 Website: [www.lifegen.net/Stanfordcourt/](http://www.lifegen.net/Stanfordcourt/)  
Credentials and/or  
certifications:






Site English Spoken: Y  
 Site Languages(s) Spoken:  
Tagalog, Spanish  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### SPRING VALLEY

**AMAYA SPRINGS HEALTH  
CARE CENTER**  
Provider ID: 420233  
 8625 LAMAR ST  
SPRING VALLEY, CA 91977  
 Phone: (323) 326-6186

Fax: (619) 461-3575  
 After Hours Phone: (323)  
326-6186  
Accepting New Patients: No  
NPI: 1518974542  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094  
 9009 CAMPO RD  
SPRING VALLEY, CA 91977  
 Phone: (619) 460-2711  
Fax: (619) 460-0451  
 After Hours Phone: (619)  
460-2711  
Accepting New Patients: No  
NPI: 1780682021  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### MOUNT MIGUEL COVENANT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

### VILLAGE HEALTH FAC

Provider ID: 171969

325 KEMPTON ST  
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619)  
931-1151

Accepting New Patients: No

Hours: SU-SA 8AM-5PM  
NPI: 1649375403

Website: [covivingmountmigu.org](http://covivingmountmigu.org)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### MOUNT MIGUEL COVENANT

#### VILLAGE HEALTH FAC

Provider ID: 171969

325 KEMPTON ST  
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619)  
931-1151

Accepting New Patients: No

Hours: SU-SA 8AM-5PM  
NPI: 1649375403

Website: [www.mountmiguelcovenantvillage.org](http://www.mountmiguelcovenantvillage.org)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### VALLEY CENTER

#### AMREEN HOME

Provider ID: 658588

13873 OAKWOOD GLEN PL  
VALLEY CENTER, CA 92082

Phone: (760) 751-9879

Fax: (760) 749-3019

After Hours Phone: (760)  
751-9879

Accepting New Patients: No  
NPI: 1700160405

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### VISTA

#### ANZA HOUSE

Provider ID: 662920

1736 ANZA AVE  
VISTA, CA 92084

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No  
NPI: 1962488007

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### GRACE HOUSE

Provider ID: 662919

2507 HIBISCUS AVE  
VISTA, CA 92081

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No  
NPI: 1962488007

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### LA FUENTE POST ACUTE

Provider ID: 429590

247 E BOBIER DR  
VISTA, CA 92084

Phone: (760) 945-3033

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## F. 专业护理机构

 After Hours Phone: (760) 945-3033

Accepting New Patients: No

 Hours: SU-SA 8:30AM-5PM

NPI: 1366802696

 Website: N/A

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER


### LIFE CARE CENTER OF VISTA

Provider ID: 171970


 304 N MELROSE DR  
VISTA, CA 92083

 Phone: (760) 724-8222


Fax: (760) 941-4870

 After Hours Phone: (760) 724-8222

Accepting New Patients: No

 Hours: SU-SA 9AM-5PM

NPI: 1811942063

 Website: [www.lcca.com](http://www.lcca.com)  
Credentials and/or

certifications:


Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

### MARSHALL HOUSE

Provider ID: 662924

 758 S MELROSE DR  
VISTA, CA 92081

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

### MONTGOMERY HOUSE

Provider ID: 662927

 1658 MONTGOMERY DR  
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A


Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

### ORIENTE HOUSE

Provider ID: 662928

 3081 ORIENTE DR  
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No  
NPI: 1962488007

 Website: N/A

Credentials and/or certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

### SAVA HOME

Provider ID: 669500


 263 AHMU TER  
VISTA, CA 92084

 Phone: (760) 305-7052

Fax: (760) 509-4949

 After Hours Phone: (760) 305-7052

Accepting New Patients: No

 Hours: M-F 8AM-5PM

NPI: 1962541177


 Website: N/A

Credentials and/or certifications:







Site English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构





*Cultural Competency: N*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **SUSAN PARHAM HOUSING CORPORATION**







*Provider ID: 662929*  
 1658 ANZA AVE  
VISTA, CA 92084  
 *Phone: (760) 721-1706*  
*Fax: (760) 721-9872*  
 *After Hours Phone: (760) 721-1706*  
*Accepting New Patients: No*  
*NPI: 1093137762*  
 *Website: N/A*  
*Credentials and/or certifications:*  
 *Site English Spoken: Y*  
*Cultural Competency: N*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **VISTA HEALTHCARE CENTER**

*Provider ID: 171990*  
 247 E BOBIER DR  
VISTA, CA 92084  
 *Phone: (760) 945-3033*  
*Fax: (760) 724-3169*  
 *After Hours Phone: (760) 945-3033*  
*Accepting New Patients: No*  
 *Hours: M-F 8AM-5PM*  
*NPI: 1912189812*








 *Website: <http://astorhealth.com>*  
*Credentials and/or certifications:*  
 *Site English Spoken: Y*  
 *Site Language(s) Spoken: Spanish, Tagalog*  
*Cultural Competency: N*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **VISTA HOUSE**

*Provider ID: 662916*  
 1768 MONTE MAR RD  
VISTA, CA 92084  
 *Phone: (760) 721-1706*  
*Fax: (760) 721-9872*  
 *After Hours Phone: (760) 721-1706*  
*Accepting New Patients: No*  
*NPI: 1962488007*  
 *Website: N/A*  
*Credentials and/or certifications:*  
 *Site English Spoken: Y*  
*Cultural Competency: N*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **VISTA KNOLL SPECIALIZED CARE FACILITY**

*Provider ID: 172017*  
 2000 WESTWOOD RD  
VISTA, CA 92083

 *Phone: (760) 630-2273*  
*Fax: (760) 630-0913*  
 *After Hours Phone: (760) 630-2273*  
*Accepting New Patients: No*  
 *Hours: SU-SA 8:30AM-5PM*  
*NPI: 1275533929*  
 *Website: <http://vistaknoll.com>*  
*Credentials and/or certifications:*  
 *Site English Spoken: Y*  
 *Site Language(s) Spoken: Korean, Tagalog, Vietnamese, Spanish*  
*Cultural Competency: N*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## G. 社区成年人服务 (CBAS) - 成人日间服务

### CHULA VISTA

#### OPEN ARMS ADHC

Provider ID: 417307

301 E J ST  
CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619)  
420-1404

Accepting New Patients: No

Hours: M-F 7AM-3PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:  
N

Facility has access to skilled  
medical interpreters on site?: N  
Interpreter Non-English  
Languages: N

Website: <http://openarmsadhc.com>

### EL CAJON

#### EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST  
EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619)  
328-2112

Accepting New Patients: No

Hours: SU-SA 9AM-3PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:  
N

Facility has access to skilled  
medical interpreters on site?: N

Interpreter Non-English  
Languages: N

Website: N/A

#### MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE  
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619)  
444-1522

Accepting New Patients: No

Hours: M-F 8AM-4PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL): Facility has access to skilled

N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:  
N

N

Facility has access to skilled  
medical interpreters on site?: N

Interpreter Non-English  
Languages: N

Website: <http://magnoliaadhc.com>

Website: <http://magnoliaadhc.com>

#### WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE  
EL CAJON, CA 92020

Phone: (619) 631-7222

Fax: (619) 631-9228

After Hours Phone: (619)  
631-7222

Accepting New Patients: No

Site Languages(s) Spoken: ,  
Spanish, Arabic, Tagalog,  
Farsi

Hours: M-F 7AM-3:30PM  
NPI: 1821125550

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: Y

If Facility has completed  
cultural competence training:  
N

N

Facility has access to skilled

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## G. 社区成年人服务 (CBAS) - 成人日间服务

medical interpreters on site?: N  
Interpreter Non-English  
Languages: Y  
Website: <https://westernadhc.wordpress.com/>

### LA MESA

#### GOLDEN LIFE ADHC

Provider ID: 619502  
9158 FLETCHER PKWY  
LA MESA, CA 91942  
Phone: (619) 357-7753  
Fax: (619) 439-6038  
After Hours Phone: (619) 357-7753  
Accepting New Patients: No  
NPI: 1093921900  
Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N  
Website: N/A

### NATIONAL CITY

#### HORIZON CBAS

Provider ID: 642082  
1035 HARBISON AVE

NATIONAL CITY, CA 91950  
Phone: (619) 474-1822  
Fax: (619) 474-1826  
After Hours Phone: (619) 474-1822  
Accepting New Patients: No  
License Number: 060000582  
NPI: 1396476388  
Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N  
Website: N/A

### POWAY

#### POWAY ADULT DAY HEALTH CARE CENTER

Provider ID: 404183  
12250 CROSTHWAITE CIR  
POWAY, CA 92064  
Phone: (858) 748-5044  
Fax: (858) 748-5405  
After Hours Phone: (858) 748-5044  
Accepting New Patients: No  
License Number: 60000822  
NPI: 1568659977

Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N  
Website: N/A

### SAN DIEGO

#### SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018  
4428 CONVOY ST STE 288  
SAN DIEGO, CA 92111  
Phone: (858) 244-4555  
Fax: (858) 724-3302  
After Hours Phone: (858) 244-4555  
Accepting New Patients: No  
Site Language(s) Spoken: Vietnamese, Mandarin, Spanish  
Hours: M-F 8AM-5PM  
License Number: 550005837  
NPI: 1396201828  
Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## G. 社区成年人服务 (CBAS) - 成人日间服务

services: Y

If Facility has completed

cultural competence training:

N

Facility has access to skilled

medical interpreters on site?: N


Interpreter Non-English


Languages: Y

 Website: Sandiegofamilycir  
cle.com

### LOVING CARE ADHC

Provider ID: 419961

 2565 CAMINO DEL RIO S  
STE 201  
SAN DIEGO, CA 92108

 Phone: (619) 718-9777

Fax: (619) 569-2855

 After Hours Phone: (619)  
718-9777

Accepting New Patients: No

 Hours: SU-SA 8:30AM-4PM  
NPI: 1346455961

 Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: N

If Facility has completed

cultural competence training:


N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English


Languages: N


 Website: www.lovingcaread  
hcc.com

### CASA PACIFICA ADHCC

Provider ID: 417303

 1424 30TH ST STE C  
SAN DIEGO, CA 92154

 Phone: (619) 424-8181

 After Hours Phone: (619)  
424-8181

Accepting New Patients: No  
NPI: 1609920305

 Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL): N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:


N

Facility has access to skilled  
medical interpreters on site?: N

Interpreter Non-English


Languages: N

 Website: www.casa- pacific  
a.com

 After Hours Phone: (760)  
682-2424

Accepting New Patients: No  
License Number: 060000832

NPI: 1528271186

 Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:


N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

 Website: www.americaread  
hc.com

## SAN MARCOS


### AMERICARE ADULT DAY

### HEALTH CARE CENTER

Provider ID: 420060

 340 RANCHEROS DR STE  
196

SAN MARCOS, CA 92069

 Phone: (760) 682-2424

Fax: (760) 471-5104

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## H. 县家庭支持服务 (IHSS)


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### SAN DIEGO

#### AGING & INDEPENDENCE SERVICES

*Specialty: Case Management*

 5560 OVERLAND AVE  
SAN DIEGO, CA 92123

 *Phone: (858) 495-5885*


*License Number: 1710308986*

*Accessibility: CONTACT*

#### PROVIDER

 *Hours: M-F*

*8:00AM-5:00PM*

 *Website: [https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome\\_supportive\\_services.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html)*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录


## ALPINE

### KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302


NPI: 1841744208


 Provider English Spoken: Y

 Arabic


Cultural Competency: N

AMMAR KHALEEL

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

### TORRES, RANDALL

Provider Gender: Male

License Number: PSY31823


NPI: 1871696435


 Provider English Spoken: Y

Cultural Competency: N

RANDALL P TORRES

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901


 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 12\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


## CAMPO

### CASTLEBERRY, DANI

Provider Gender: Female

License Number: LCS95022

NPI: 1053706853

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

DANI E CASTLEBERRY

 1388 BUCKMAN SPRINGS  
RD

CAMPO, CA 91906

 Phone: (619) 662-4100

Fax: (619) 478-9164

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


## CHULA VISTA

### BAYLON, ALDO

Provider Gender: Male

License Number: PSY29904


NPI: 1649429150

 Provider English Spoken: Y


Cultural Competency: N

ALDO BAYLON

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-4PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

## **CASTLEBERRY, DANI**


Provider Gender: Female  
License Number: LCS95022  
NPI: 1053706853

Provider English Spoken: Y  
 Spanish


Cultural Competency: N

DANI E CASTLEBERRY

 780 BAY BLVD STE 200  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 240-7825

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **CELAYA, PATRICIA**


Provider Gender: Female  
License Number: PSY33233  
NPI: 1952656902

Provider English Spoken: Y  
 Spanish

Cultural Competency: N

PATRICIA E CELAYA

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-4PM


## **GALLO, LINDA**

Provider Gender: Female  
License Number: PSY27375  
NPI: 1427773621


Provider English Spoken: Y  
Cultural Competency: N

LINDA C GALLO

 780 BAY BLVD STE 200  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 240-7852

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


## **GOULD, HILARY**

Provider Gender: Female  
License Number: PSY31088  
NPI: 1104297696


Provider English Spoken: Y  
Cultural Competency: N

HILARY GOULD

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 271-0260

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

## **JUAREZ, AMERICA**

Provider Gender: Female

License Number: LCS92516

NPI: 1386281541

Provider English Spoken: Y  
Cultural Competency: N

AMERICA P JUAREZ

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

## **KURZ, TROY**

Provider Gender: Male

License Number: A157190

NPI: 1154862357

Provider English Spoken: Y  
Cultural Competency: N

TROY L KURZ

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619)

662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-8PM  
SA 8AM-4PM

## **MALAK, LAWRENCE**

Provider Gender: Male

License Number: A115345

NPI: 1467773028

Provider English Spoken: Y  
Cultural Competency: N

LAWRENCE T MALAK

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

## **MARTINEZ, STEPHANIE**

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y  
 Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 271-0260

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

## **SHIELDS, SEBASTIAN**

Provider Gender: Male







License Number: MFC124495

NPI: 1558895342

Provider English Spoken: Y



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# I. 精神健康名录








 *Spanish*  
*Cultural Competency: N*  
SEBASTIAN L SHIELDS  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 662-4100*  
*Fax: (619) 425-1184*  
 *After Hours Phone: (619) 662-4100*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*







## TROYER, EMILY

*Provider Gender: Female*  
*License Number: A149101*  
*NPI: 1326484437*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
EMILY A TROYER  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 662-4100*  
*Fax: (619) 425-1184*  
 *After Hours Phone: (619) 662-4100*  
 *Website: N/A*  
*Accepting New Patients: Yes*

*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-8PM SA 8AM-4PM*

## WIJAYARATNE, IMANIE

*Provider Gender: Male*  
*License Number: PSY25044*  
*NPI: 1932358355*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
IMANIE S WIJAYARATNE  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 662-4100*  
*Fax: (619) 271-0260*  
 *After Hours Phone: (619) 662-4100*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*




 678 3RD AVE  
CHULA VISTA, CA 91910  
 *Phone: (619) 662-4100*  
*Fax: (619) 271-0260*  
 *After Hours Phone: (619) 662-4100*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

## EL CAJON

### ARAIZA, ERNESTINA

*Provider Gender: Female*  
*License Number: PSY32549*  
*NPI: 1568608636*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
ERNESTINA ARAIZA  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 *Phone: (619) 662-4100*  
*Fax: (619) 785-3356*  
 *After Hours Phone: (619) 662-4100*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### ARNOLD, REBECCA

*Provider Gender: Female*  
*License Number: MFC95778*  
*NPI: 1225580350*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
REBECCA L ARNOLD  
 855 E MADISON AVE  
EL CAJON, CA 92020  
 *Phone: (619) 270-3600*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Fax: (360) 462-2746

☎ After Hours Phone: (619) 270-3600

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨 Site Languages(s) Spoken: Japanese, Spanish, Italian, Chinese, Farsi, Arabic, Mandarin

TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## ARNOLD, REBECCA

Provider Gender: Female

License Number: MFC95778

NPI: 1225580350

🗨 Provider English Spoken: Y  
Cultural Competency: N

REBECCA L ARNOLD

📍 855 E MADISON AVE  
EL CAJON, CA 92020

☎ Phone: (619) 270-3600

Fax: (360) 462-2746

☎ After Hours Phone: (619) 270-3600

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨 Site Languages(s) Spoken: Japanese, Spanish, Italian,

Chinese, Farsi, Arabic, Mandarin

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## CASEY, SHANNON

Provider Gender: Female

License Number: PSY31889

NPI: 1548873755

🗨 Provider English Spoken: Y  
Cultural Competency: N

SHANNON K CASEY

📍 215 W MADISON AVE  
EL CAJON, CA 92020

☎ Phone: (760) 737-6935

Fax: (760) 741-2782

☎ After Hours Phone: (760) 737-6935

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-7PM

## CASEY, SHANNON

Provider Gender: Female

License Number: PSY31889

NPI: 1548873755

🗨 Provider English Spoken: Y  
Cultural Competency: N

SHANNON K CASEY

📍 215 W MADISON AVE  
EL CAJON, CA 92020

☎ Phone: (760) 737-6935

Fax: (760) 741-2782

☎ After Hours Phone: (760) 737-6935

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-7PM

## CRUZ, GUADALUPE

Provider Gender: Male

License Number: LCS101900

NPI: 1649727942

🗨 Provider English Spoken: Y  
Spanish




Cultural Competency: N

GUADALUPE A CRUZ

📍 855 E MADISON AVE  
EL CAJON, CA 92020

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# I. 精神健康名录

 Phone: (619) 440-2751  
 Fax: (360) 462-2746  
 After Hours Phone: (619) 440-2751  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U



Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER



## **DIA, ALI**

Provider Gender: Male  
License Number: A47803  
NPI: 1912031030


 Provider English Spoken: Y  
 Arabic, Turkish  
Cultural Competency: N

ALI R DIA

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100  
 Fax: (619) 785-3356

 After Hours Phone: (619) 662-4100


 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): Cultural Competency: N  
N


 Accessibility: CONTACT PROVIDER



 Hours: M-F  
8:30AM-5:30PM


## **FRAGOSO, DOMINIQUE**

Provider Gender: Female  
License Number: LCS12601  
NPI: 1518521830

 Provider English Spoken: Y  
Cultural Competency: N

DOMINIQUE C FRAGOSO  
 215 W MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 667-6125  
 Fax: (619) 590-9036

 After Hours Phone: (619) 667-6125

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U


Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

## **GUARDADO-SOTO, RAQUEL**

Provider Gender: Female  
License Number: PSY26883  
NPI: 1194999276

 Provider English Spoken: Y

 855 E MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 440-2751  
 Fax: (858) 633-4692

 After Hours Phone: (619) 440-2751

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction


American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

## **MANUEL, FRANCESCA**

Provider Gender: Female  
License Number: LCS107210  
NPI: 1275097081

 Provider English Spoken: Y  
Cultural Competency: N

FRANCESCA A MANUEL  
 215 W MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 401-6236  
 Fax: (619) 590-9036

 After Hours Phone: (619) 401-6236

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

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# I. 精神健康名录

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## MAXWELL, MELISSA

Provider Gender: Female


License Number: LCS90791

NPI: 1275182826

 Provider English Spoken: Y  
Cultural Competency: N

MELISSA K MAXWELL

 215 W MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 667-6125  
Fax: (619) 590-9036

 After Hours Phone: (619) 667-6125

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## POSTLETHWAITE, ALEJANDRA


Provider Gender: Female


License Number: A88938

NPI: 1750566915

 Provider English Spoken: Y  
Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 855 E MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 440-2751  
Fax: (858) 633-4692

 After Hours Phone: (619) 440-2751

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

## SADDA, REEM

Provider Gender: Female

License Number: A163129


NPI: 1871921833


 Provider English Spoken: Y  
 Arabic

Cultural Competency: N

REEM J SADDA

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## WEAVER, AMANDA

Provider Gender: Female


License Number: MFC105361

NPI: 1174266423

 Provider English Spoken: Y  
Cultural Competency: N

AMANDA R WEAVER

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100  
Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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# I. 精神健康名录

## WHEELER, KIM

Provider Gender: Female  
License Number: PSY34237  
NPI: 1700577434  
☐ Provider English Spoken: Y  
Cultural Competency: N  
KIM N WHEELER  
📍 875 EL CAJON BLVD  
EL CAJON, CA 92020  
☎ Phone: (619) 662-4100  
Fax: (619) 785-3356  
📞 After Hours Phone: (619)  
662-4100  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 11\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM

## ENCINITAS

### GARCIA, ROSEMARIE

Provider Gender: Female  
License Number: MFC123590  
NPI: 1710410980  
☐ Provider English Spoken: Y  
Cultural Competency: N  
ROSEMARIE C GARCIA  
📍 1130 2ND ST  
ENCINITAS, CA 92024  
☎ Phone: (760) 736-6767

Fax: (760) 736-8740  
📞 After Hours Phone: (760)  
736-6767  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
☐ Site Languages(s) Spoken:  
Spanish  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM

### GOMEZ, JUANITA

Provider Gender: Female  
License Number: PSY27439  
NPI: 1790915759  
☐ Provider English Spoken: Y  
Cultural Competency: N  
JUANITA GOMEZ

📍 1505 ENCINITAS BLVD  
ENCINITAS, CA 92024  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender

restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER

### LOPEZ, JOANNA

Provider Gender: Female  
License Number: MFC50381  
NPI: 1275664385  
☐ Provider English Spoken: Y  
Cultural Competency: N  
JOANNA M LOPEZ  
📍 1130 2ND ST  
ENCINITAS, CA 92024  
☎ Phone: (760) 736-6767  
Fax: (760) 736-8740  
📞 After Hours Phone: (760)  
736-6767  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM



## ESCONDIDO



### ARLINGHAUS, RENE

Provider Gender: Female  
License Number: LCS80909  
NPI: 1568973964




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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
RENE M ARLINGHAUS  
 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 *Phone: (619) 662-4100*  
*Fax: (619) 662-4196*  
 *After Hours Phone: (619)*  
*662-4100*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 18\None*  
*Gender Restriction: No Gender*  
*restriction*





*American Sign Language (ASL):*  
N  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*

## **BECERRA, GABRIEL**



*Provider Gender: Male*  
*License Number: LCS114743*  
*NPI: 1205313319*  
 *Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: N*  
GABRIEL CELESTINO  
BECERRA  
 425 N DATE ST  
ESCONDIDO, CA 92025  
 *Phone: (760) 520-8340*  
*Fax: (360) 462-2752*  
 *After Hours Phone: (760)*  
*520-8340*

 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 18\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
N  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M 7AM-7:30PM*  
*TU 7AM-4:30PM*  
*W 7AM-7:30PM*  
*TH-F 7AM-4:30PM*








## **BELINSKY, MARIA**

*Provider Gender: Female*  
*License Number: LCS69175*  
*NPI: 1760867824*  
 *Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: N*  
MARIA T BELINSKY  
 426 N DATE ST  
ESCONDIDO, CA 92025  
 *Phone: (760) 690-5900*  
*Fax: (858) 633-4693*  
 *After Hours Phone: (760)*  
*690-5900*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M 9AM-4PM*  
*W-F 9AM-4PM*

## **BELINSKY, MARIA**

*Provider Gender: Female*  
*License Number: LCS69175*  
*NPI: 1760867824*  
 *Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: N*  
MARIA T BELINSKY  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 *Phone: (760) 520-8100*  
*Fax: (858) 633-4691*  
 *After Hours Phone: (760)*  
*520-8100*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
N  
 *Accessibility: CONTACT*  
*PROVIDER*

## **BELINSKY, MARIA**

*Provider Gender: Female*  
*License Number: LCS69175*  
*NPI: 1760867824*

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# I. 精神健康名录

Provider English Spoken: Y  
 Spanish

Cultural Competency: N

MARIA T BELINSKY

728 E VALLEY PKWY  
ESCONDIDO, CA 92025

Phone: (760) 737-6900

Fax: (760) 520-8100

After Hours Phone: (760)  
737-6900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

## **BERNABE, NARAE**

Provider Gender: Female

License Number: MFC95046

NPI: 1942633490

Provider English Spoken: Y  
Cultural Competency: N

NARAE L BERNABE

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)  
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **CARLTON-PENN, CORNELIA**

Provider Gender: Female

License Number: PSY14310

NPI: 1891720611

Provider English Spoken: Y  
 German

Cultural Competency: N

CORNELIA J CARLTON-PENN

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)  
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **CASTILLO, TIFFANY**

Provider Gender: Female

License Number: A158480

NPI: 1114459252

Provider English Spoken: Y  
 Spanish

Cultural Competency: N

TIFFANY A CASTILLO

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)  
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **CASTILLO, TIFFANY**

Provider Gender: Female

License Number: A158480

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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# I. 精神健康名录

NPI: 1114459252

Provider English Spoken: Y

Spanish

Cultural Competency: N

TIFFANY A CASTILLO

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)  
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## CHRISTENSEN, PATTI

Provider Gender: Female

License Number: LCS24129

NPI: 1245434745

Provider English Spoken: Y

Cultural Competency: N

PATTI J CHRISTENSEN

1002 E GRAND AVE

ESCONDIDO, CA 92025

Phone: (760) 741-2660

After Hours Phone: (760)  
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

## DOCKERY, LEE

Provider Gender: Male

License Number: A178136

NPI: 1225526320

Provider English Spoken: Y  
Cultural Competency: N

LEE M DOCKERY

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)  
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## ESTRADA PATINO, ANGELA

Provider Gender: Female

License Number: PSY31789

NPI: 1629339015

Provider English Spoken: Y

Spanish

Cultural Competency: N

ANGELA J ESTRADA PATINO

460 N ELM ST

ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (760) 466-1373

After Hours Phone: (760)  
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 14\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-0PM

## FU, KATHERINE

Provider Gender: Female

License Number: A187562

NPI: 1356877807

Provider English Spoken: Y


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# I. 精神健康名录

*Cultural Competency: N*

**KATHERINE FU**

 704 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


Fax: (619) 662-4196

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **GILL, MANPREET**

Provider Gender: Male


License Number: A180790

NPI: 1144875535

 Provider English Spoken: Y  
Cultural Competency: N


**MANPREET GILL**

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 250-8300


Fax: (858) 633-4698

 After Hours Phone: (760)  
250-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **GUZZO, RICHARD**

Provider Gender: Male


License Number: LCS8288


NPI: 1497898431

 Provider English Spoken: Y  
Cultural Competency: N

**RICHARD L GUZZO**

 1002 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (760) 737-6960

 After Hours Phone: (760)  
737-6960

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

## **HARRIS, LAURA**

Provider Gender: Female


License Number: LCS18214

NPI: 1255640280

 Provider English Spoken: Y  
Cultural Competency: N

**LAURA S HARRIS**

 1002 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (760) 741-2660

Fax: (760) 741-2647

 After Hours Phone: (760)  
741-2660

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **KULKARNI, NISHAT**

Provider Gender: Male


License Number: A187134

NPI: 1669034732

 Provider English Spoken: Y  
Cultural Competency: N

**NISHAT KULKARNI**

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

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# I. 精神健康名录

Fax: (858) 633-4698

☎ After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270

NPI: 1578983664

🗣 Provider English Spoken: Y

🗣 Spanish

Cultural Competency: N

DANIEL K MAGOS

📍 425 N DATE ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

☎ After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

## MARTINEZ, NORAYMA

Provider Gender: Female

License Number: LCS100019

NPI: 1669808267

🗣 Provider English Spoken: Y  
Cultural Competency: N

NORAYMA MARTINEZ

📍 728 E VALLEY PKWY  
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (360) 462-2748

☎ After Hours Phone: (760) 737-6900

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915

🗣 Provider English Spoken: Y  
Cultural Competency: N

ALEJANDRA POSTLETHWAITE

📍 425 N DATE ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

☎ After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

## PRASAD, AMITHA

Provider Gender: Female

License Number: A158657

NPI: 1821436882

🗣 Provider English Spoken: Y  
Cultural Competency: N

AMITHA, PRASAD

📍 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9270

Fax: (760) 294-9268

☎ After Hours Phone: (760)

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# I. 精神健康名录

294-9270  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\19  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## PRATHER, ALLYSON

Provider Gender: Female  
License Number: MFC45441  
NPI: 1083725006

Provider English Spoken: Y  
Cultural Competency: N

ALLYSON M PRATHER

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8340  
Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## PRATHER, ALLYSON

Provider Gender: Female  
License Number: MFC45441  
NPI: 1083725006

Provider English Spoken: Y  
Cultural Competency: N

ALLYSON M PRATHER

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8340  
Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## RIOS, SIERRA

Provider Gender: Female  
License Number: LCS91970  
NPI: 1942746128

Provider English Spoken: Y  
Spanish

Cultural Competency: N

SIERRA K RIOS

425 N DATE ST  
ESCONDIDO, CA 92025

Phone: (760) 520-8340  
Fax: (360) 462-2752

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## ROBLEDO, DAMIAN

Provider Gender: Male  
License Number: LCS66152  
NPI: 1376831289

Provider English Spoken: Y  
Spanish

Cultural Competency: N

DAMIAN ROBLEDO

425 N DATE ST  
ESCONDIDO, CA 92025




Phone: (760) 520-8340  
Fax: (360) 462-2752

After Hours Phone: (760)






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# I. 精神健康名录





520-8340  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M 7AM-7:30PM  
TU 7AM-4:30PM  
W 7AM-7:30PM  
TH-F 7AM-4:30PM



## RODARTE, GABRIEL

Provider Gender: Male  
License Number: A87906  
NPI: 1184649212  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
GABRIEL RODARTE  
 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8340  
Fax: (858) 633-4698  
 After Hours Phone: (760) 520-8340  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender


restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM








## STONE, CALVIN

Provider Gender: Male  
License Number: 20A18127  
NPI: 1275995870  
 Provider English Spoken: Y  
Cultural Competency: N  
CALVIN T STONE  
 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8300  
Fax: (858) 633-4698  
 After Hours Phone: (760) 520-8300






 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## STREET, KYLE

Provider Gender: Male  
License Number: 20A21304  
NPI: 1457912131  
 Provider English Spoken: Y


Cultural Competency: N  
KYLE A STREET  
 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8300  
Fax: (858) 633-4698  
 After Hours Phone: (760) 520-8300  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

## SUOZZO, JOSEPH

Provider Gender: Male  
License Number: PSY18393  
NPI: 1821013228  
 Provider English Spoken: Y  
Cultural Competency: N  
JOSEPH M SUOZZO  
 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8340  
Fax: (858) 633-4698  
 After Hours Phone: (760) 520-8340  
 Website: N/A  
Accepting New Patients: Yes

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# I. 精神健康名录

Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER


## TEETER-WITT, ALYSSA

Provider Gender: Female  
License Number: PSY31075  
NPI: 1932308442

 Provider English Spoken: Y  
Cultural Competency: N

ALYSSA TEETER-WITT

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8300  
Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

## TEETER-WITT, ALYSSA

Provider Gender: Female


License Number: PSY31075

NPI: 1932308442

 Provider English Spoken: Y  
Cultural Competency: N

ALYSSA TEETER-WITT

 426 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 690-5900  
Fax: (858) 633-4693

 After Hours Phone: (760) 690-5900

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

## THOMAS, PAULA

Provider Gender: Female


License Number: LCS29517

NPI: 1821389966


 Provider English Spoken: Y  
Cultural Competency: N

PAULA M THOMAS

 425 N DATE ST  
ESCONDIDO, CA 92025


 Phone: (760) 520-8340  
Fax: (360) 462-2752

 After Hours Phone: (760) 520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken: Spanish, German, French, Cappadocian Greek, Hindi

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## TIZNADO, MONICA

Provider Gender: Female

License Number: MFC81074

NPI: 1497895197


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

MONICA M TIZNADO

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8340  
Fax: (360) 462-2752

 After Hours Phone: (760) 520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender restriction


American Sign Language (ASL):

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# I. 精神健康名录

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## **TIZNADO, MONICA**

Provider Gender: Female

License Number: MFC81074

NPI: 1497895197

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

MONICA M TIZNADO

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

 After Hours Phone: (760) 520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **VALLEZ-BARLAM, ANDREA**

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

 Provider English Spoken: Y


 German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM


 426 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 690-5900

Fax: (858) 633-4693

 After Hours Phone: (760) 690-5900

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

## **VALLEZ-BARLAM, ANDREA**

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

 Provider English Spoken: Y


 German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

 488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025

 Phone: (760) 466-9800

Fax: (858) 633-4693

 After Hours Phone: (760) 466-9800

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken: German, Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **VAQUERO, JUANA**

Provider Gender: Female

License Number: PSY28364

NPI: 1023459708


 Provider English Spoken: Y

Cultural Competency: N

JUANA VAQUERO

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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# I. 精神健康名录

## **VENNAM, VAMSI**

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

☐ Provider English Spoken: Y

Cultural Competency: N

VAMSI K VENNAM

📍 425 N DATE ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

🕒 After Hours Phone: (760)  
520-8300

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

## **WOODWORTH, JENNIFER**

Provider Gender: Female

License Number: PSY26963

NPI: 1639362494

☐ Provider English Spoken: Y

Cultural Competency: N

JENNIFER WOODWORTH

📍 425 N DATE ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (858) 633-4698

🕒 After Hours Phone: (760)  
520-8340

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## **FALLBROOK**

### **GILROY, LAURA**

Provider Gender: Female

License Number: LCS27123

NPI: 1437427978

☐ Provider English Spoken: Y

Cultural Competency: N

LAURA L GILROY

📍 1328 S MISSION RD

FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 457-4700

🕒 After Hours Phone: (760)  
451-4720

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

### **MAGEE, ANNA**

Provider Gender: Female

License Number: LCS107407

NPI: 1194234609

☐ Provider English Spoken: Y

Cultural Competency: N

ANNA M MAGEE

📍 1328 S MISSION RD

FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 457-4700

🕒 After Hours Phone: (760)  
451-4720

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

### **MCAULEY, ROBERT**

Provider Gender: Male

License Number: G23317

NPI: 1194881888

☐ Provider English Spoken: Y






Cultural Competency: N

ROBERT A MCAULEY

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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 1328 S MISSION RD  
FALLBROOK, CA 92028  
 Phone: (760) 451-4730  
Fax: (760) 457-4700  
 After Hours Phone: (760)  
451-4730  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 12\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## MILES, RENEE


Provider Gender: Female  
License Number: LCS70204  
NPI: 1053763623  
 Provider English Spoken: Y  
Cultural Competency: N  
RENEE S MILES

 1328 S MISSION RD  
FALLBROOK, CA 92028  
 Phone: (760) 451-4720  
Fax: (760) 457-4700  
 After Hours Phone: (760)  
451-4720  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender

restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## RODARTE, GABRIEL







Provider Gender: Male  
License Number: A87906  
NPI: 1184649212  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
GABRIEL RODARTE  
 1328 S MISSION RD  
FALLBROOK, CA 92028  
 Phone: (760) 541-4730  
Fax: (760) 457-4700  
 After Hours Phone: (760)  
541-4730  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER






## IMPERIAL BEACH

### GONZALEZ, CLAUDIA

Provider Gender: Female  
License Number: LCS100328  
NPI: 1770055543


 Provider English Spoken: Y  
Cultural Competency: N  
CLAUDIA GONZALEZ  
 949 PALM AVE  
IMPERIAL BEACH, CA  
91932  
 Phone: (619) 429-3733  
Fax: (619) 628-5550  
 After Hours Phone: (619)  
429-3733  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## ZUREK, BEDEANIA

Provider Gender: Female  
License Number: LCS74215  
NPI: 1942375811  
 Provider English Spoken: Y  
Cultural Competency: N  
BEDEANIA R ZUREK  
 949 PALM AVE  
IMPERIAL BEACH, CA  
91932  
 Phone: (619) 429-3733  
Fax: (619) 628-5550  
 After Hours Phone: (619)  
429-3733  
 Website: N/A  
Accepting New Patients: Yes


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# I. 精神健康名录



Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## LA JOLLA






### BAILIS, JESSICA



Provider Gender: Female  
License Number: PSY27537  
NPI: 1760739049  
 Provider English Spoken: Y  
Cultural Competency: N  
JESSICA R BAILIS

 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273





 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER




### BOOTH, CHRISTOPHER

Provider Gender: Male  
License Number: PSY26073  
NPI: 1568893162  
 Provider English Spoken: Y  
Cultural Competency: N  
CHRISTOPHER R BOOTH  
 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### BOOTH, CHRISTOPHER



Provider Gender: Male  
License Number: PSY26073  
NPI: 1568893162  
 Provider English Spoken: Y  
Cultural Competency: N  
CHRISTOPHER R BOOTH  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### BOUTELLE, KERRI

Provider Gender: Male  
License Number: PSY21823  
NPI: 1780620906  
 Provider English Spoken: Y  
Cultural Competency: N  
KERRI N BOUTELLE

 3344 N TORREY PINES CT  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

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# I. 精神健康名录

## **BOUTELLE, KERRI**

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906


 Provider English Spoken: Y


Cultural Competency: N

KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **BOUTELLE, KERRI**

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906


 Provider English Spoken: Y


Cultural Competency: N


KERRI N BOUTELLE

 8950 VILLA LA JOLLA DR  
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

 After Hours Phone: (858)  
246-1654

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

## **BRAR, SIMERJEET**

Provider Gender: Female

License Number: A144765

NPI: 1417393307


 Provider English Spoken: Y

Cultural Competency: N

SIMERJEET K BRAR

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **CHESHER, NICHOLAS**

Provider Gender: Male

License Number: PSY29290


NPI: 1124539697

 Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **CRANDAL, BRENT**

Provider Gender: Male

License Number: PSY26294

NPI: 1588739452

 Provider English Spoken: Y

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# I. 精神健康名录

*Cultural Competency: N*

**BRENT R CRANDAL**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8372

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **DUARTE, KRISTEN**

Provider Gender: Female

License Number: PSY31227


NPI: 1093119364


 Provider English Spoken: Y  
Cultural Competency: N

**KRISTEN L DUARTE**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **DUARTE, KRISTEN**

Provider Gender: Female


License Number: PSY31227


NPI: 1093119364

 Provider English Spoken: Y  
Cultural Competency: N

**KRISTEN L DUARTE**

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **EICHEN, DAWN**

Provider Gender: Female

License Number: PSY27823

NPI: 1861043366

 Provider English Spoken: Y  
Cultural Competency: N

**DAWN M EICHEN**

 3344 N TORREY PINES CT  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **EICHEN, DAWN**

Provider Gender: Female

License Number: PSY27823


NPI: 1861043366

 Provider English Spoken: Y  
Cultural Competency: N

**DAWN M EICHEN**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

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# I. 精神健康名录

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


## EICHEN, DAWN

Provider Gender: Female  
License Number: PSY27823  
NPI: 1861043366


 Provider English Spoken: Y  
Cultural Competency: N

DAWN M EICHEN

 8950 VILLA LA JOLLA DR  
STE C212  
LA JOLLA, CA 92037

 Phone: (858) 246-1654  
Fax: (858) 246-3181

 After Hours Phone: (858)  
246-1654

 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

## PROVIDER

 Hours: M-F 8AM-5PM


## ELLEDEGE, LINDSAY

Provider Gender: Female  
License Number: LCS96136  
NPI: 1619428828


 Provider English Spoken: Y  
Cultural Competency: N

LINDSAY E ELLEDEGE

 8950 VILLA LA JOLLA DR  
STE 101  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## FINN, DAPHNA

Provider Gender: Female  
License Number: A152291  
NPI: 1639522725


 Provider English Spoken: Y  
Cultural Competency: N

DAPHNA M FINN

 8950 VILLA LA JOLLA DR

STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


## HUEGE, STEVEN

Provider Gender: Male  
License Number: C141122  
NPI: 1598716367

 Provider English Spoken: Y  
Cultural Competency: N

STEVEN F HUEGE

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None


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# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **HUEGE, STEVEN**

*Provider Gender: Male*

*License Number: C141122*


*NPI: 1598716367*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**STEVEN F HUEGE**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **KHAFAJA, MOHAMAD**

*Provider Gender: Male*

*License Number: A115892*

*NPI: 1780867119*

 *Provider English Spoken: Y*


 *Arabic*

*Cultural Competency: N*

**MOHAMAD H KHAFAJA**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LASSWELL, EVE**

*Provider Gender: Female*

*License Number: PSY30220*


*NPI: 1013483635*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**EVE N LASSWELL**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LEDBETTER, ALEX**

*Provider Gender: Male*

*License Number: 20A20454*


*NPI: 1073017315*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

**ALEX W LEDBETTER**

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

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# I. 精神健康名录


 *Accessibility: CONTACT PROVIDER*

## LEE, DAVID

*Provider Gender: Male*

*License Number: A124329*

*NPI: 1871884130*

 *Provider English Spoken: Y*

 *Korean*


*Cultural Competency: N*

DAVID J LEE

 9350 CAMPUS POINT DR  
STE LLB

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## LI, XIA

*Provider Gender: Female*

*License Number: A163344*

*NPI: 1336670413*

 *Provider English Spoken: Y*

 *Mandarin*

*Cultural Competency: N*

XIA LI

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## LINKE, SARAH

*Provider Gender: Female*

*License Number: PSY27116*


*NPI: 1487026415*

 *Provider English Spoken: Y*

*Cultural Competency: N*

SARAH E LINKE

 8939 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## MAGINOT-CHESHER, TAMARA

*Provider Gender: Female*

*License Number: PSY28678*

*NPI: 1043441165*


 *Provider English Spoken: Y*

*Cultural Competency: N*


TAMARA R MAGINOT

CHESHER

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (858) 534-7792*

*Fax: (619) 471-9017*

 *After Hours Phone: (858) 534-7792*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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# I. 精神健康名录

## **MARTINEZ, STEPHANIE**

Provider Gender: Female

License Number: A152787

NPI: 1699126367


Provider English Spoken: Y

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **MAXWELL, BENJAMIN**

Provider Gender: Male

License Number: A108124


NPI: 1740415926

Provider English Spoken: Y

Cultural Competency: N

BENJAMIN K MAXWELL

 8950 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (858) 534-8019

Fax: (858) 534-6727

 After Hours Phone: (858)  
534-8019

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

## **MENDEZ, ANDRES**

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

Provider English Spoken: Y


Spanish

Cultural Competency: N

ANDRES G MENDEZ

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **MOORE, SHAVON**

Provider Gender: Female

License Number: A152789

NPI: 1053682773


Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **MOORE, SHAVON**

Provider Gender: Female

License Number: A152789

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




# I. 精神健康名录


NPI: 1053682773

 Provider English Spoken: Y  
Cultural Competency: N

SHAVON C MOORE

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 826-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
826-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

## NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620


 Provider English Spoken: Y


 Vietnamese

Cultural Competency: N

HOANG A NGUYEN

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (619) 497-6673

 After Hours Phone: (619)  
497-6673

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

## NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

 Provider English Spoken: Y


 Vietnamese


Cultural Competency: N

HOANG A NGUYEN

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

## PELHAM, WILLIAM

Provider Gender: Male

License Number: PSY33091


NPI: 1306629399


 Provider English Spoken: Y  
Cultural Competency: N

WILLIAM E PELHAM

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220

 Provider English Spoken: Y

 French

Cultural Competency: N



WALI Z QAYOUMI



 9350 CAMPUS POINT DR  
STE LLB

LA JOLLA, CA 92037







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# I. 精神健康名录

 Phone: (619) 284-3746  
Fax: (888) 579-8781  
 After Hours Phone: (619) 284-3746  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U



Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM





## QAYOUMI, WALI

Provider Gender: Male  
License Number: A168429  
NPI: 1093178220  
 Provider English Spoken: Y  
 French  
Cultural Competency: N  
WALI Z QAYOUMI  
 9500 GILMAN DR STE 2069  
LA JOLLA, CA 92093  
 Phone: (858) 822-5881  
Fax: (888) 539-8781  
 After Hours Phone: (858) 822-5881  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM







## REED, KRISTIE

Provider Gender: Female  
License Number: PSY30934  
NPI: 1679869556  
 Provider English Spoken: Y  
Cultural Competency: N  
KRISTIE L REED  
 3344 N TORREY PINES CT  
LA JOLLA, CA 92037





 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## REED, KRISTIE

Provider Gender: Female  
License Number: PSY30934  
NPI: 1679869556

 Provider English Spoken: Y  
Cultural Competency: N  
KRISTIE L REED  
 8950 VILLA LA JOLLA DR STE C212  
LA JOLLA, CA 92037  
 Phone: (800) 926-8372  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8372  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## RICHARD, MARLA

Provider Gender: Female  
License Number: G65188  
NPI: 1578720934  
 Provider English Spoken: Y  
Cultural Competency: N  
MARLA G RICHARD  
 8950 VILLA LA JOLLA DR STE C101  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y

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# I. 精神健康名录


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **RICHARD, MARLA**

Provider Gender: Female


License Number: G65188


NPI: 1578720934

 Provider English Spoken: Y  
Cultural Competency: N

MARLA G RICHARD

 9300 MEDIAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


## **SCHNEEBERGER, ANDRES**

Provider Gender: Male

License Number: C175502

NPI: 1184867376


 Provider English Spoken: Y  
Cultural Competency: N

ANDRES R SCHNEEBERGER  
 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **TARLE, STEPHANIE**

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403


 Provider English Spoken: Y  
Cultural Competency: N

STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **TARVER, LESLIE**

Provider Gender: Female

License Number: A169181

NPI: 1811300957


 Provider English Spoken: Y  
Cultural Competency: N

LESLIE B TARVER

 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

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# I. 精神健康名录

## PROVIDER

### WISHNEK, HANNAH

Provider Gender: Female

License Number: LCS105699


NPI: 1578012043

 Provider English Spoken: Y

Cultural Competency: N


HANNAH K WISHNEK

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

### ZLATAR, ZVINKA

Provider Gender: Female

License Number: PSY26230

NPI: 1497139059

 Provider English Spoken: Y

 Spanish

Cultural Competency: N


ZVINKA Z ZLATAR

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## LAKESIDE

### BRUNETTO, HEIDI

Provider Gender: Female

License Number: PSY26809


NPI: 1023250453

 Provider English Spoken: Y

Cultural Competency: N


HEIDI M BRUNETTO

 10039 VINE ST  
LAKESIDE, CA 92040

 Phone: (619) 390-9975

Fax: (858) 633-4690

 After Hours Phone: (619)  
390-9975

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-5PM


## NATIONAL CITY

### FLANIGAN, MARILYN

Provider Gender: Female

License Number: MFC97326


NPI: 1588996912

 Provider English Spoken: Y

Cultural Competency: N

MARILYN Y FLANIGAN

 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)  
200-2426

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM

### KUGEL, SAMUEL

Provider Gender: Male

License Number: A54412

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# I. 精神健康名录

NPI: 1497813968

☐ Provider English Spoken: Y

☐ Portuguese, Spanish

Cultural Competency: N

SAMUEL KUGEL

📍 502 EUCLID AVE STE 305  
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-2600

Fax: (619) 472-5721

🕒 After Hours Phone: (619)  
472-2600

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Spanish, Portuguese

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-5PM

## LAD, NIKISHA

Provider Gender: Female

License Number: LCS120676

NPI: 1942857107

☐ Provider English Spoken: Y  
Cultural Competency: N

NIKISHA J LAD

📍 2400 E 8TH ST  
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

🕒 After Hours Phone: (619)  
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: SU 8AM-5PM  
M-F 8AM-5PM

## SACHS, MELISSA

Provider Gender: Female

License Number: LCS76968

NPI: 1649760356

☐ Provider English Spoken: Y  
Cultural Competency: N

MELISSA R SACHS

📍 2400 E 8TH ST  
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 259-2807

🕒 After Hours Phone: (619)  
662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

## SILVEY, CHRISTOPHER

Provider Gender: Male

License Number: LCS85942

NPI: 1932793502

☐ Provider English Spoken: Y  
Cultural Competency: N

CHRISTOPHER J SILVEY

📍 2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 474-4008

🕒 After Hours Phone: (844)  
200-2426

🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

## OCEANSIDE

### ACOSTA, AZUCENA


Provider Gender: Female

License Number: LCS98304

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# I. 精神健康名录

NPI: 1255937496

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

AZUCENA ACOSTA

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM  
SA 9AM-4PM

## ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

AZUCENA ACOSTA


 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

AZUCENA ACOSTA

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

## BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956


 Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish, Chinese, Farsi


TDD: U

Min/Max Age: 5\80

Gender Restriction: No Gender restriction

American Sign Language (ASL):









N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM



## BELL, JENNIFER







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# I. 精神健康名录







*Provider Gender: Female*  
*License Number: 20A20702*  
*NPI: 1154614956*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**JENNIFER L BELL**  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*TDD: U*  
*Min/Max Age: 5\80*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 9AM-4PM*


## **BELL, JENNIFER**

*Provider Gender: Female*  
*License Number: 20A20702*  
*NPI: 1154614956*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**JENNIFER L BELL**  
 818 PIER VIEW WAY  
OCEANSIDE, CA 92054









 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*TDD: U*  
*Min/Max Age: 5\80*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

## **CHALMERS, VIRGINIA**

*Provider Gender: Female*  
*License Number: LCS28053*  
*NPI: 1265613715*  
 *Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: N*  
**VIRGINIA C CHALMERS**  
 619 CROUCH ST  
OCEANSIDE, CA 92054  
 *Phone: (760) 736-6767*  
*Fax: (760) 566-1501*  
 *After Hours Phone: (760) 736-6767*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*

*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

## **CHRISTIANSO, WARREN**

*Provider Gender: Male*  
*License Number: 20A9664*  
*NPI: 1932359445*  
 *Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: N*  
**WARREN R CHRISTIANSO II**  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-7PM F 8AM-5PM SA 9AM-4PM*

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# I. 精神健康名录

## **CHRISTIANSON, WARREN**

*Provider Gender: Male*

*License Number: 20A9664*

*NPI: 1932359445*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*


**WARREN R CHRISTIANSON II**

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

*Fax: (760) 414-3892*

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM*

## **CHRISTIANSON, WARREN**

*Provider Gender: Male*

*License Number: 20A9664*

*NPI: 1932359445*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

**WARREN R CHRISTIANSON II**

 517 N HORNE ST

OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

*Fax: (760) 414-3892*

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM*

## **CHRISTIANSON, WARREN**

*Provider Gender: Male*

*License Number: 20A9664*

*NPI: 1932359445*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

**WARREN R CHRISTIANSON II**

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

*Fax: (760) 414-3892*

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM*

## **CHRISTIANSON, WARREN**

*Provider Gender: Male*

*License Number: 20A9664*

*NPI: 1932359445*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

**WARREN R CHRISTIANSON II**

 4700 N RIVER RD

OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*

*Fax: (760) 414-3892*

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*


*N*

 *Accessibility: CONTACT PROVIDER*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



# I. 精神健康名录


 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## **CHRISTIANSON, WARREN**

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## **COOK, SHERYL**

Provider Gender: Female


License Number: PSY15449

NPI: 1750420816

 Provider English Spoken: Y  
Cultural Competency: N

SHERYL G COOK

 619 CROUCH ST STE 100  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 9AM-6:15PM  
W 9AM-6PM

## **CRUZ, VANESSA**

Provider Gender: Female


License Number: LCS87166

NPI: 1285170662

 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **CRUZ, VANESSA**

Provider Gender: Female


License Number: LCS87166

NPI: 1285170662

 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-7PM  
F 9AM-5PM  
SA 9AM-4PM

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# I. 精神健康名录

## **CRUZ, VANESSA**

Provider Gender: Female


License Number: LCS87166

NPI: 1285170662

 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-7PM  
F 9AM-5PM  
SA 9AM-4PM

## **CRUZ, VANESSA**

Provider Gender: Female

License Number: LCS87166


NPI: 1285170662

 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **DOUGHERTY, CHRISTINE**

Provider Gender: Female


License Number: LCS26686

NPI: 1003194960

 Provider English Spoken: Y  
Cultural Competency: N

CHRISTINE A DOUGHERTY

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **DOUGHERTY, CHRISTINE**

Provider Gender: Female


License Number: LCS26686

NPI: 1003194960

 Provider English Spoken: Y  
Cultural Competency: N

CHRISTINE A DOUGHERTY

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **DOUGHERTY, CHRISTINE**

Provider Gender: Female

License Number: LCS26686







NPI: 1003194960

 Provider English Spoken: Y  
Cultural Competency: N






CHRISTINE A DOUGHERTY


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 8AM-4PM


## JENSEN, BRIAN

Provider Gender: Male  
License Number: PSY26041  
NPI: 1518138049  
 Provider English Spoken: Y  
Cultural Competency: N  
BRIAN M JENSEN  
 619 CROUCH ST  
OCEANSIDE, CA 92054  
 Phone: (760) 566-1620  
Fax: (760) 433-4040  
 After Hours Phone: (760)  
566-1620  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER






## KRAPES, MICHAEL

Provider Gender: Male  
License Number: PSY25077  
NPI: 1215233028  
 Provider English Spoken: Y  
Cultural Competency: N  
MICHAEL B KRAPES  
 2210 MESA DR STE 300  
OCEANSIDE, CA 92054  
 Phone: (760) 736-6767  
Fax: (760) 566-1501  
 After Hours Phone: (760)  
736-6767  
 Website: N/A







Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## MENDEZ, ADRIANA

Provider Gender: Female  
License Number: LCS86435  
NPI: 1356777361

 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
ADRIANA J MENDEZ  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## MENDEZ, ADRIANA

Provider Gender: Female  
License Number: LCS86435  
NPI: 1356777361  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
ADRIANA J MENDEZ  
 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: N/A  
Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## **MENDEZ, ADRIANA**

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## **MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333


 Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333


 Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333


 Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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# I. 精神健康名录

## **MONTEZ, REBECCA**

Provider Gender: Female

License Number: LCS26869

NPI: 1396047809


Provider English Spoken: Y

Spanish


Cultural Competency: N


REBECCA MONTEZ

 2210 MESA DR STE 5  
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

Fax: (619) 736-8740

 After Hours Phone: (760)  
757-5841

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **NEVILLE, MARGARET**

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N


MARGARET R NEVILLE

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **NEVILLE, MARGARET**

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

Provider English Spoken: Y


Cultural Competency: N


MARGARET R NEVILLE

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

## **NEVILLE, MARGARET**

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

Provider English Spoken: Y


Cultural Competency: N

MARGARET R NEVILLE

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **ORTIZ, BEVERLY**

Provider Gender: Female

License Number: MFC121355


NPI: 1760826572

Provider English Spoken: Y

Cultural Competency: N

BEVERLY L ORTIZ

 2210 MESA DR STE 300  
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Fax: (760) 566-1501

📞 After Hours Phone: (760) 736-6767

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

## **PATEL, MITESH**

Provider Gender: Male

License Number: A181164

NPI: 1568880292

📺 Provider English Spoken: Y  
Cultural Competency: N

MITESH K PATEL

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM  
TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

## **PATEL, MITESH**

Provider Gender: Male

License Number: A181164

NPI: 1568880292

📺 Provider English Spoken: Y  
Cultural Competency: N

MITESH K PATEL

📍 517 N HORNE ST  
OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM  
TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

## **PATEL, MITESH**

Provider Gender: Male

License Number: A181164

NPI: 1568880292

📺 Provider English Spoken: Y  
Cultural Competency: N

MITESH K PATEL

📍 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM  
TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

## **SANCHEZ, ADRIANA**

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

📺 Provider English Spoken: Y  
Spanish




Cultural Competency: N

ADRIANA SANCHEZ

📍 4700 N RIVER RD  
OCEANSIDE, CA 92057

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# I. 精神健康名录

 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


## **SANCHEZ, ADRIANA**

Provider Gender: Female  
License Number: LCS97093  
NPI: 1609450451

Provider English Spoken: Y  
 Spanish  
Cultural Competency: N

ADRIANA SANCHEZ

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4PM


## **SANCHEZ, ADRIANA**

Provider Gender: Female  
License Number: LCS97093  
NPI: 1609450451

Provider English Spoken: Y  
 Spanish  
Cultural Competency: N

ADRIANA SANCHEZ

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **SMITH, SONYA**


Provider Gender: Female  
License Number: LCS82598  
NPI: 1902070857

Provider English Spoken: Y

Spanish  
Cultural Competency: N

SONYA L SMITH

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


## **SMITH, SONYA**

Provider Gender: Female  
License Number: LCS82598  
NPI: 1902070857

Provider English Spoken: Y  
 Spanish  
Cultural Competency: N

SONYA L SMITH

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

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# I. 精神健康名录

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

SONYA L SMITH

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081


 Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081


 Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081


 Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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# I. 精神健康名录

## POWAY

### GILL, MANPREET

Provider Gender: Male

License Number: A180790

NPI: 1144875535

☐ Provider English Spoken: Y  
Cultural Competency: N

### MANPREET GILL

📍 13010 POWAY RD  
POWAY, CA 92064

☎ Phone: (858) 218-3000

Fax: (360) 462-2742

🕒 After Hours Phone: (858)  
218-3000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

### KULKARNI, NISHAT

Provider Gender: Male

License Number: A187134

NPI: 1669034732

☐ Provider English Spoken: Y  
Cultural Competency: N

### NISHAT KULKARNI

📍 13010 POWAY RD

POWAY, CA 92064

☎ Phone: (858) 218-3000

Fax: (360) 462-2742

🕒 After Hours Phone: (858)  
218-3000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

### MODHWADIA, MAMTA

Provider Gender: Female

License Number: A113990

NPI: 1043353667

☐ Provider English Spoken: Y

☐ German

Cultural Competency: N

### MAMTA D MODHWADIA

📍 13010 POWAY RD  
POWAY, CA 92064

☎ Phone: (858) 218-3000

Fax: (360) 462-2742

🕒 After Hours Phone: (858)  
218-3000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:

Spanish

TDD: U

Min/Max Age: 16\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-5PM

### POSTLETHWAITE,

### ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915

☐ Provider English Spoken: Y  
Cultural Competency: N

### ALEJANDRA POSTLETHWAITE

📍 13010 POWAY RD  
POWAY, CA 92064

☎ Phone: (858) 218-3000

Fax: (858) 633-4688

🕒 After Hours Phone: (858)  
218-3000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

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# I. 精神健康名录

## **STREET, KYLE**


Provider Gender: Male


License Number: 20A21304

NPI: 1457912131

 Provider English Spoken: Y  
Cultural Competency: N

KYLE A STREET

 13010 POWAY RD  
POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (360) 462-2742

 After Hours Phone: (858)  
218-3000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **VALLEZ-BARLAM, ANDREA**

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

 Provider English Spoken: Y


 German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

 13010 POWAY RD

POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (858) 633-4688

 After Hours Phone: (858)  
218-3000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

## **SAN DIEGO**

### **ABERCROMBIE, SHERI**

Provider Gender: Female


License Number: PSY18536

NPI: 1932292422

 Provider English Spoken: Y  
Cultural Competency: N

SHERI ABERCROMBIE

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-4PM

### **ABERCROMBIE, SHERI**

Provider Gender: Female


License Number: PSY18536

NPI: 1932292422

 Provider English Spoken: Y  
Cultural Competency: N

SHERI ABERCROMBIE

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8787


Fax: (858) 987-5825

 After Hours Phone: (858)  
810-8787

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT

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# I. 精神健康名录

## PROVIDER

### ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778

NPI: 1619304748

Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

### ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778

NPI: 1619304748

Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

### BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

Provider English Spoken: Y

Cultural Competency: N

SARAH J BANKS

6655 ALVARADO RD

SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

### BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

Provider English Spoken: Y

Cultural Competency: N

SARAH J BANKS

200 W ARBOR DR FL 1

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132

Provider English Spoken: Y

Cultural Competency: N

SARAH J BANKS

4510 EXECUTIVE DR STE

325

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# I. 精神健康名录

SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

## **BARRON, KAVITA**

Provider Gender: Female  
License Number: A155596  
NPI: 1821418542

☑ Provider English Spoken: Y  
Cultural Competency: N

KAVITA BARRON

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

## **BASS, GURGIANA**

Provider Gender: Male  
License Number: PSY24750  
NPI: 1639325277

☑ Provider English Spoken: Y  
Cultural Competency: N

GURGIANA BASS

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
☎ Phone: (858) 279-0925  
📞 After Hours Phone: (858) 279-0925  
🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M 8AM-4:30PM  
TU 8AM-0PM  
W 8AM-4:30PM  
TH 8AM-0PM

## **BASS, GURGIANA**

Provider Gender: Male  
License Number: PSY24750  
NPI: 1639325277

☑ Provider English Spoken: Y  
Cultural Competency: N

GURGIANA BASS

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
☎ Phone: (858) 810-8787  
Fax: (858) 987-5825

📞 After Hours Phone: (858) 810-8787

🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

## **BRAR, SIMERJEET**

Provider Gender: Female  
License Number: A144765  
NPI: 1417393307

☑ Provider English Spoken: Y  
Cultural Competency: N

SIMERJEET K BRAR

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 576-1700  
Fax: (858) 966-8164

📞 After Hours Phone: (858) 576-1700

🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y

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# I. 精神健康名录

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## BREEDLOVE, AMANDA


Provider Gender: Female


License Number: MFC139230

NPI: 1316487119

 Provider English Spoken: Y  
Cultural Competency: N

AMANDA A BREEDLOVE

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## BROWN, DARCIE

Provider Gender: Female


License Number: MFC119851

NPI: 1639796071

 Provider English Spoken: Y  
Cultural Competency: N

DARCIE D BROWN

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## CALLAGHAN, KATHRYN

Provider Gender: Female


License Number: MFC106901

NPI: 1558768812

 Provider English Spoken: Y  
Cultural Competency: N

KATHRYN R CALLAGHAN

 2630 1ST AVE  
SAN DIEGO, CA 92103

 Phone: (619) 234-2158


Fax: (619) 234-0206

 After Hours Phone: (619)  
234-2158

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## CEBALLOS, JACQUELINE CAMILLE

Provider Gender: Female

License Number: LCS110194


NPI: 1093350258

 Provider English Spoken: Y  
Cultural Competency: N

JACQUELINE CAMILLE

CEBALLOS

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-9676

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-9676

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

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# I. 精神健康名录


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **CEBALLOS, JACQUELINE CAMILLE**

Provider Gender: Female

License Number: LCS110194


NPI: 1093350258

 Provider English Spoken: Y  
Cultural Competency: N

JACQUELINE CAMILLE

CEBALLOS

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **CHESHER, NICHOLAS**

Provider Gender: Male


License Number: PSY29290

NPI: 1124539697

 Provider English Spoken: Y  
Cultural Competency: N


NICHOLAS J CHESHER

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **CIOBANU, COSMINA**

Provider Gender: Female


License Number: A137628

NPI: 1285049932


 Provider English Spoken: Y  
Cultural Competency: N

COSMINA S CIOBANU

 8001 FROST ST  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-8164

 After Hours Phone: (858) 576-1700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **CIOBANU, COSMINA**

Provider Gender: Female


License Number: A137628

NPI: 1285049932

 Provider English Spoken: Y  
Cultural Competency: N

COSMINA S CIOBANU

 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-8164

 After Hours Phone: (858) 576-1700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction


American Sign Language (ASL): N

N

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# I. 精神健康名录

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **CIOBANU, COSMINA**

*Provider Gender: Female*

*License Number: A137628*


*NPI: 1285049932*

 *Provider English Spoken: Y*

*Cultural Competency: N*

COSMINA S CIOBANU

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 576-1700*

*Fax: (858) 966-8164*

 *After Hours Phone: (858) 576-1700*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*


*Min/Max Age: 0\19*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **CIOBANU, COSMINA**

*Provider Gender: Female*

*License Number: A137628*

*NPI: 1285049932*


 *Provider English Spoken: Y*


*Cultural Competency: N*


COSMINA S CIOBANU

 4510 EXECUTIVE DR STE  
315

SAN DIEGO, CA 92121

 *Phone: (858) 534-8019*

 *After Hours Phone: (858) 534-8019*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **CLEMENT, LUIS**

*Provider Gender: Male*

*License Number: PSY28534*

*NPI: 1235364712*


 *Provider English Spoken: Y*

*Cultural Competency: N*

LUIS F CLEMENT

 2630 1ST AVE

SAN DIEGO, CA 92103

 *Phone: (619) 234-2158*

*Fax: (619) 234-0505*

 *After Hours Phone: (619) 234-2158*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

## **CRISOL, CAROLINE**

*Provider Gender: Female*

*License Number: MFC88616*

*NPI: 1962663617*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

CAROLINE M CRISOL LMFT

INC

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*

*Fax: (619) 205-1952*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

## **DEACON, CASSIE**

*Provider Gender: Female*

*License Number: LCS94105*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


# I. 精神健康名录

NPI: 1720452998


 Provider English Spoken: Y  
Cultural Competency: N

CASSIE C DEACON

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 5:30PM-8:30PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

## DEACON, CASSIE

Provider Gender: Female


License Number: LCS94105

NPI: 1720452998

 Provider English Spoken: Y  
Cultural Competency: N


CASSIE C DEACON

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER



 Hours: M 8:30AM-5:30PM  
TU 5:30PM-8:30PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

## DEL AGUILA, FABIOLA

Provider Gender: Female

License Number: PSY24471


NPI: 1720283211

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

FABIOLA DEL AGUILA

 1016 OUTER RD  
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

## DIAZ, JAENAI

Provider Gender: Female

License Number: LCS80689


NPI: 1508241811

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

JAENAI DIAZ

 350 DICKINSON ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

## DIOKNO, RHODA

Provider Gender: Female


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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

License Number: PSY28073

NPI: 1629109483


 Provider English Spoken: Y

Cultural Competency: N

ROHDA CARINO DIOKNO

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619)

234-2158

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

## **DOLNAK, DOUGLAS**

Provider Gender: Male

License Number: 20A6059

NPI: 1316147085


 Provider English Spoken: Y

Cultural Competency: N

DOUGLAS R DOLNAK

 10737 CAMINO RUIZ


SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844)

200-2426

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-6PM

## **DOSS, KATIE**

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979


 Provider English Spoken: Y

Cultural Competency: N

KATIE L DOSS

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680


 After Hours Phone: (858)

810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

## **DOSS, KATIE**

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979


 Provider English Spoken: Y

Cultural Competency: N

KATIE L DOSS

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680


 After Hours Phone: (858)

279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **DSOUZA, NICOLE**

Provider Gender: Male

License Number: LCS101958

NPI: 1225462799

 Provider English Spoken: Y

Cultural Competency: N

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# I. 精神健康名录

NICOLE A DSOUZA

 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N





 Accessibility: CONTACT  
PROVIDER

**DUNN-PIRIO, ANASTASIE**

Provider Gender: Female  
License Number: A157861  
NPI: 1700177136

 Provider English Spoken: Y  
Cultural Competency: N

ANASTASIE M DUNN-PIRIO

 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103  
 Phone: (619) 543-3500  
Fax: (888) 539-8781  
 After Hours Phone: (619)  
543-3500  
 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

**ESTAVILLO, SAUL**

Provider Gender: Male


License Number: MFC102610  
NPI: 1528330073

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

SAUL J ESTAVILLO

 286 EUCLID AVE STE 309  
SAN DIEGO, CA 92114  
 Phone: (619) 527-7390  
Fax: (619) 527-7394

 After Hours Phone: (619)  
527-7390

 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

**ESTAVILLO, SAUL**



Provider Gender: Male

License Number: MFC102610  
NPI: 1528330073

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

SAUL J ESTAVILLO

 3045 BEYER BLVD STE  
D101  
SAN DIEGO, CA 92154  
 Phone: (619) 662-4161  
Fax: (619) 662-4109

 After Hours Phone: (619)  
662-4161

 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM

**FIRESTONE, MICHELLE**

Provider Gender: Female  
License Number: PSY33081  
NPI: 1114687803

 Provider English Spoken: Y  
Cultural Competency: N

MICHELLE E FIRESTONE

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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# I. 精神健康名录

☎ *After Hours Phone: (858) 279-0925*

🌐 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

## **FIRESTONE, MICHELLE**

*Provider Gender: Female*

*License Number: PSY33081*

*NPI: 1114687803*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

MICHELLE E FIRESTONE

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎ *Phone: (858) 810-8700*  
*Fax: (858) 633-4680*

☎ *After Hours Phone: (858) 810-8700*

🌐 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT*

## **PROVIDER**

## **FITZGERALD, MICHAEL**

*Provider Gender: Male*

*License Number: A73710*

*NPI: 1336393578*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

MICHAEL W FITZGERALD

📍 16918 DOVE CANYON RD  
STE 100

SAN DIEGO, CA 92127

☎ *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

🌐 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

## **FLANIGAN, MARILYN**

*Provider Gender: Female*

*License Number: MFC97326*

*NPI: 1588996912*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

MARILYN Y FLANIGAN

📍 10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

☎ *Phone: (844) 200-2426*  
*Fax: (858) 578-4417*

☎ *After Hours Phone: (844) 200-2426*

🌐 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-6PM*

## **FORZANI, CHRISTINA**

*Provider Gender: Female*

*License Number: PSY25710*

*NPI: 1902939630*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

CHRISTINA A FORZANI

📍 4290 POLK AVE  
SAN DIEGO, CA 92105

☎ *Phone: (619) 961-1497*  
*Fax: (858) 633-4682*

☎ *After Hours Phone: (619) 961-1497*

🌐 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **FRANK, GUIDO**

*Provider Gender: Male*


*License Number: A86429*

*NPI: 1578608733*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

**GUIDO K FRANK**

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-8145*

*Fax: (858) 966-8154*

 *After Hours Phone: (858) 966-8145*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\19*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **FRY, LIANE**

*Provider Gender: Female*


*License Number: MFC42570*

*NPI: 1003110917*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

**LIANE M FRY**

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

*Fax: (619) 595-0258*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 12\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **GARCIA, RICHARD**

*Provider Gender: Male*


*License Number: LCS28742*

*NPI: 1881198554*

 *Provider English Spoken: Y*  
*Cultural Competency: N*


**RICHARD R GARCIA**

 2630 1ST AVE  
SAN DIEGO, CA 92103

 *Phone: (619) 234-2158*

*Fax: (619) 234-0505*

 *After Hours Phone: (619) 234-2158*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*  
*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-4:30PM*

## **GARCIA, JENNI**

*Provider Gender: Female*

*License Number: LPCC10346*


*NPI: 1437775863*

 *Provider English Spoken: Y*  
 *Spanish*

*Cultural Competency: N*

**JENNI GARCIA**

 3025 BEYER BLVD  
SAN DIEGO, CA 92154

 *Phone: (619) 662-4100*


*Fax: (619) 662-4119*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



# I. 精神健康名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM

## GIAMONA, KRISTEN

Provider Gender: Female  
License Number: PSY28419  
NPI: 1376824383

🗨️ Provider English Spoken: Y  
Cultural Competency: N

KRISTEN M GIAMONA

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎️ Phone: (858) 810-8787  
Fax: (858) 987-5825

🕒 After Hours Phone: (858)  
810-8787

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## GIAMONA, KRISTEN

Provider Gender: Female  
License Number: PSY28419  
NPI: 1376824383

🗨️ Provider English Spoken: Y  
Cultural Competency: N

KRISTEN M GIAMONA

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

☎️ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)  
279-0925

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## GOMEZ, JUANITA

Provider Gender: Female  
License Number: PSY27439  
NPI: 1790915759

🗨️ Provider English Spoken: Y  
Cultural Competency: N

JUANITA GOMEZ

📍 6030 VILLAGE WAY  
SAN DIEGO, CA 92130

☎️ Phone: (800) 926-8372  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8372

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## GULOTTA, SAMANTHA

Provider Gender: Female  
License Number: MFC134199  
NPI: 1790407732

🗨️ Provider English Spoken: Y  
Cultural Competency: N

SAMANTHA L GULOTTA

📍 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

☎️ Phone: (800) 926-8273

🕒 After Hours Phone: (800)  
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## HERNANDEZ, SILVIA

Provider Gender: Female  
License Number: MFC51787  
NPI: 1982821179

🗨️ Provider English Spoken: Y  
Cultural Competency: N

SILVIA E HERNANDEZ

📍 3025 BEYER BLVD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

SAN DIEGO, CA 92154  
☎ Phone: (760) 520-8340  
☎ Fax: (619) 662-4119  
🕒 After Hours Phone: (760) 520-8340  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER

## JOSHI, YASH

Provider Gender: Male  
License Number: A147156  
NPI: 1598151433  
☑ Provider English Spoken: Y  
Cultural Competency: N  
YASH B JOSHI

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

## KAYE, WALTER

Provider Gender: Male  
License Number: A24819  
NPI: 1922076223  
☑ Provider English Spoken: Y  
Cultural Competency: N  
WALTER H KAYE

📍 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121  
☎ Phone: (858) 534-8019  
🕒 After Hours Phone: (858) 534-8019  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

## KHAFAJA, MOHAMAD

Provider Gender: Male  
License Number: A115892  
NPI: 1780867119  
☑ Provider English Spoken: Y  
☑ Arabic  
Cultural Competency: N

MOHAMAD H KHAFAJA  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

## KHAMISA, SORAIYA

Provider Gender: Female  
License Number: LCS81951  
NPI: 1811254386  
☑ Provider English Spoken: Y  
Cultural Competency: N  
SORAIYA N KHAMISA  
📍 4520 EXECUTIVE DR STE A  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **KLUEMPER, NICOLE**

*Provider Gender: Female*


*License Number: PSY27064*

*NPI: 1902125818*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**NICOLE S KLUEMPER**

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*  
*Fax: (858) 633-4680*

 *After Hours Phone: (858) 279-0925*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

## **KLUEMPER, NICOLE**

*Provider Gender: Female*

*License Number: PSY27064*


*NPI: 1902125818*

 *Provider English Spoken: Y*


*Cultural Competency: N*

**NICOLE S KLUEMPER**

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*  
*Fax: (858) 279-0377*

 *After Hours Phone: (858) 810-8700*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

## **LABIB, MICHAEL**

*Provider Gender: Male*


*License Number: PSY34180*


*NPI: 1609055797*

 *Provider English Spoken: Y*  
 *Arabic*


*Cultural Competency: N*

**MICHAEL LABIB**

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173


 *Phone: (619) 662-4100*  
*Fax: (619) 785-3384*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


 *Site Languages(s) Spoken: Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LAIDLAW, JOHN**

*Provider Gender: Male*

*License Number: MFC44560*


*NPI: 1689790073*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

**JOHN K LAIDLAW**

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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# I. 精神健康名录



## **LEBENSOHN CHIALVO, FLORENCIA**

*Provider Gender: Female*  
*License Number: PSY30776*  
*NPI: 1134788730*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

FLORENCIA LEBENSOHN  
CHIALVO

 7910 FROST ST STE 350  
SAN DIEGO, CA 92123

 *Phone: (858) 496-4800*  
 *After Hours Phone: (858)  
496-4800*


 *Website: N/A*


*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LEBENSOHN CHIALVO, FLORENCIA**

*Provider Gender: Female*  
*License Number: PSY30776*  
*NPI: 1134788730*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

FLORENCIA LEBENSOHN  
CHIALVO

 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800)  
926-8273*

 *Website: N/A*


*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*



## **LEDBETTER, ALEX**

*Provider Gender: Male*  
*License Number: 20A20454*  
*NPI: 1073017315*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

ALEX W LEDBETTER

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 *Phone: (800) 926-8273*  
 *After Hours Phone: (800)  
926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*

*restriction*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

## **LEE, DAVID**


*Provider Gender: Male*  
*License Number: A124329*  
*NPI: 1871884130*

 *Provider English Spoken: Y*

 *Korean*  
*Cultural Competency: N*

DAVID J LEE

 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*  
 *After Hours Phone: (800)  
926-8273*

 *Website: N/A*


*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LI, XIA**






*Provider Gender: Female*  
*License Number: A163344*  
*NPI: 1336670413*

 *Provider English Spoken: Y*



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# I. 精神健康名录


 Mandarin  
Cultural Competency: N  
XIA LI  
 16918 DOVE CANYON RD  
STE 100  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A





Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

## LINKE, SARAH



Provider Gender: Female  
License Number: PSY27116  
NPI: 1487026415

 Provider English Spoken: Y  
Cultural Competency: N  
SARAH E LINKE

 4910 DIRECTORS PL STE  
250  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A


Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM


## LINKE, SARAH


Provider Gender: Female  
License Number: PSY27116  
NPI: 1487026415

 Provider English Spoken: Y  
Cultural Competency: N  
SARAH E LINKE

 9909 MIRA MESA BLVD  
STE 200  
SAN DIEGO, CA 92131  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A



Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U



Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM

## LIU, TIMOTHY

Provider Gender: Male  
License Number: A105535  
NPI: 1720262801


 Provider English Spoken: Y  
 Mandarin, Yue Chinese  
Cultural Competency: N  
TIMOTHY C LIU

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925  
 Website: N/A



Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## LIU, TIMOTHY

Provider Gender: Male  
License Number: A105535  
NPI: 1720262801

 Provider English Spoken: Y  
 Mandarin, Yue Chinese  
Cultural Competency: N  
TIMOTHY C LIU

 7011 LINDA VISTA RD

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

SAN DIEGO, CA 92111  
☎ Phone: (858) 810-8700  
☎ Fax: (858) 279-0377  
🕒 After Hours Phone: (858) 810-8700  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER

**LONGARDNER, KATHERINE**  
Provider Gender: Female  
License Number: A137963  
NPI: 1801215926  
☑ Provider English Spoken: Y  
Cultural Competency: N  
KATHERINE M LONGARDNER  
📍 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
☎ Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

**MAGINOT-CHESHER, TAMARA**  
Provider Gender: Female  
License Number: PSY28678  
NPI: 1043441165  
☑ Provider English Spoken: Y  
Cultural Competency: N  
TAMARA R MAGINOT  
CHESHER  
📍 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121  
☎ Phone: (858) 534-8019  
☎ Fax: (858) 534-6727

🕒 After Hours Phone: (858) 534-8019  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM

**MALAK, LAWRENCE**  
Provider Gender: Male  
License Number: A115345  
NPI: 1467773028

☑ Provider English Spoken: Y  
Cultural Competency: N  
LAWRENCE T MALAK  
📍 4290 POLK AVE  
SAN DIEGO, CA 92105  
☎ Phone: (619) 563-0250  
☎ Fax: (858) 633-4681  
🕒 After Hours Phone: (619) 563-0250  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 14\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-2PM

**MARTINEZ, STEPHANIE**  
Provider Gender: Female  
License Number: A152787  
NPI: 1699126367  
☑ Provider English Spoken: Y  
☑ Spanish  
Cultural Competency: N  
STEPHANIE MARTINEZ  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
🌐 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y


Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

## MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y


Spanish

Cultural Competency: N

STEPHANIE MARTINEZ


 350 DICKINSON ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## MCCULLUM, TIFFANY

Provider Gender: Female

License Number: PSY29329

NPI: 1528306206


Provider English Spoken: Y

Cultural Competency: N

TIFFANY MCCULLUM

 286 EUCLID AVE STE 302

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 205-1949

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## MILLS, BRAD

Provider Gender: Male

License Number: LCS87409

NPI: 1598542813

Provider English Spoken: Y


Spanish

Cultural Competency: N

BRAD A MILLS

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619) 233-8500

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish

TDD: U

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# I. 精神健康名录

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **MIRON, JEAN-PHILIPPE**


*Provider Gender: Male*


*License Number: A186033*


*NPI: 1952178196*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**JEAN-PHILIPPE MIRON**

 16918 DOVE CANYON RD  
STE 100  
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **MONTOYA, JESSICA**

*Provider Gender: Female*


*License Number: PSY31647*

*NPI: 1003421256*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**JESSICA L MONTOYA**

 4168 FRONT ST FL 3  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **MOORE, SHAVON**

*Provider Gender: Female*


*License Number: A152789*


*NPI: 1053682773*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**SHAVON C MOORE**

 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **MUHAMMAD, LAMA**

*Provider Gender: Female*

*License Number: A156500*

*NPI: 1558701623*

 *Provider English Spoken: Y*  
 *Arabic*

*Cultural Competency: N*

**LAMA MUHAMMAD**

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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# I. 精神健康名录

## **MUHAMMAD, LAMA**

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y

Arabic

Cultural Competency: N

LAMA MUHAMMAD

350 DICKINSON ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **NAKAMURA, TIFFANY**

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349

Provider English Spoken: Y

Cultural Competency: N

TIFFANY NAKAMURA

4510 EXECUTIVE DR STE  
315

SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)  
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **NGUYEN, HOANG**

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Vietnamese

Cultural Competency: N

HOANG A NGUYEN

410 DICKINSON ST STE 100

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **NGUYEN, HOANG**

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Vietnamese

Cultural Competency: N

HOANG A NGUYEN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **NING, GRACE**

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Chinese, Mandarin  
Cultural Competency: N  
GRACE J NING  
 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
279-0925  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## NING, GRACE

Provider Gender: Female  
License Number: PSY27293  
NPI: 1598911315  
 Provider English Spoken: Y  
 Chinese, Mandarin  
Cultural Competency: N  
GRACE J NING  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
810-8700  
 Website: N/A  
Accepting New Patients: Yes

Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## NORMAN, MARC

Provider Gender: Male  
License Number: PSY16278  
NPI: 1922169101  
 Provider English Spoken: Y  
Cultural Competency: N  
MARC A NORMAN  
 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

## NORMAN, MARC




Provider Gender: Male  
License Number: PSY16278  
NPI: 1922169101  
 Provider English Spoken: Y  
Cultural Competency: N  
MARC A NORMAN  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (619) 543-2827  
 After Hours Phone: (619)  
543-2827  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

## ORFF, HENRY








Provider Gender: Male  
License Number: PSY27099  
NPI: 1144685215  
 Provider English Spoken: Y  
Cultural Competency: N  
HENRY J ORFF  
 4520 EXECUTIVE DR STE  
P2  
SAN DIEGO, CA 92121  
 Phone: (844) 757-5337  
 After Hours Phone: (844)  
757-5337

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录


 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

## ORTIZ, MARIA







Provider Gender: Female  
License Number: PSY30953  
NPI: 1497980775  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
MARIA E ORTIZ  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114  
 Phone: (619) 662-4100  
Fax: (619) 662-4158  
 After Hours Phone: (619) 662-4100  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT

## PROVIDER


### PATTERSON-HYATT, KIMBERLY






Provider Gender: Female  
License Number: PSY31903  
NPI: 1780997742  
 Provider English Spoken: Y  
Cultural Competency: N  
KIMBERLY G

### PATTERSON-HYATT






 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619) 662-4100  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### PATTON, MICHAEL

Provider Gender: Male  
License Number: LCS18244  
NPI: 1184756702  
 Provider English Spoken: Y  
Cultural Competency: N  
MICHAEL A PATTON

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
Fax: (619) 687-1067  
 After Hours Phone: (619) 233-8500  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### PRINCE, RENEE

Provider Gender: Female  
License Number: PSY32206  
NPI: 1467737908  
 Provider English Spoken: Y  
Cultural Competency: N  
RENEE K PRINCE  
 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126  
 Phone: (844) 200-2426  
Fax: (619) 474-4008  
 After Hours Phone: (844) 200-2426  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-6PM*

## **QAYOUMI, WALI**

*Provider Gender: Male*

*License Number: A168429*

*NPI: 1093178220*

 *Provider English Spoken: Y*


 *French*

*Cultural Competency: N*

**WALI Z QAYOUMI**


 4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121

 *Phone: (619) 294-3746*

*Fax: (888) 539-8781*

 *After Hours Phone: (619) 294-3746*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **RADOJEVIC, NATASHA**

*Provider Gender: Female*

*License Number: PSY28495*


*NPI: 1821365008*

 *Provider English Spoken: Y*

*Cultural Competency: N*

**NATASHA RADOJEVIC**

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

*Fax: (858) 633-4680*

 *After Hours Phone: (858) 810-8700*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TU 8:30AM-5:30PM*


*TH-F 8:30AM-5:30PM*

## **RADOJEVIC, NATASHA**

*Provider Gender: Female*

*License Number: PSY28495*


*NPI: 1821365008*

 *Provider English Spoken: Y*

*Cultural Competency: N*

**NATASHA RADOJEVIC**

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

*Fax: (858) 633-4680*

 *After Hours Phone: (858) 279-0925*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TU*

*8:30AM-5:30PM*

*TH-F 8:30AM-5:30PM*

## **RIBEIRO CALDAS**


### **DOMINGUES, ISABEL**

*Provider Gender: Female*

*License Number: A132160*

*NPI: 1023367216*

 *Provider English Spoken: Y*

 *French, Portuguese, Spanish*

*Cultural Competency: N*

**ISABEL A RIBEIRO CALDAS**

**DOMINGUES**

 350 DICKINSON ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

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# I. 精神健康名录

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **RICHARD, MARLA**

Provider Gender: Female

License Number: G65188


NPI: 1578720934

 Provider English Spoken: Y  
Cultural Competency: N

MARLA G RICHARD

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **RICHARD, MARLA**

Provider Gender: Female


License Number: G65188


NPI: 1578720934


 Provider English Spoken: Y  
Cultural Competency: N

MARLA G RICHARD

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **SACHS, MELISSA**

Provider Gender: Female


License Number: LCS76968

NPI: 1649760356

 Provider English Spoken: Y  
Cultural Competency: N

MELISSA R SACHS

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

## **SALO, STEPHANIE**

Provider Gender: Female


License Number: PSY26290

NPI: 1477967784

 Provider English Spoken: Y  
Cultural Competency: N

STEPHANIE P SALO

 4290 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 17\None


Gender Restriction: No Gender restriction

American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **SARPY, ANN**

*Provider Gender: Female*

*License Number: G183850*

*NPI: 1750426656*


 *Provider English Spoken: Y*

*Cultural Competency: N*

*ANN K SARPY*


 1016 OUTER RD

SAN DIEGO, CA 92154

 *Phone: (619) 429-3733*


*Fax: (619) 628-5550*

 *After Hours Phone: (619) 429-3733*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **SAWYER, CAROLYN**

*Provider Gender: Female*

*License Number: A149116*

*NPI: 1043653249*


 *Provider English Spoken: Y*

*Cultural Competency: N*

*CAROLYN M SAWYER*

 3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

 *Phone: (858) 966-4032*

*Fax: (858) 966-6227*

 *After Hours Phone: (858) 966-4032*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\19*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **SAWYER, CAROLYN**

*Provider Gender: Female*


*License Number: A149116*

*NPI: 1043653249*


 *Provider English Spoken: Y*

*Cultural Competency: N*

*CAROLYN M SAWYER*


 3665 KEARNY VILLA RD STE 400

SAN DIEGO, CA 92123

 *Phone: (858) 966-5990*

*Fax: (858) 966-7508*

 *After Hours Phone: (858) 966-5990*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\19*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SAWYER, CAROLYN**

*Provider Gender: Female*

*License Number: A149116*


*NPI: 1043653249*

 *Provider English Spoken: Y*

*Cultural Competency: N*

*CAROLYN M SAWYER*

 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

 *Phone: (858) 246-0794*

*Fax: (858) 496-9257*

 *After Hours Phone: (858) 246-0794*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*


*Min/Max Age: 0\19*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

## SCHELLINGER, KRISTON

Provider Gender: Female


License Number: PSY26313


NPI: 1710234273

 Provider English Spoken: Y  
Cultural Competency: N

KRISTON B SCHELLINGER

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (858) 246-1979

 After Hours Phone: (858)  
246-1979

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313


NPI: 1710234273

 Provider English Spoken: Y  
Cultural Competency: N

KRISTON B SCHELLINGER

 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

 Phone: (858) 246-1979

 After Hours Phone: (858)

246-1979

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313


NPI: 1710234273


 Provider English Spoken: Y  
Cultural Competency: N

KRISTON B SCHELLINGER

 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER


 Hours: M-F 8AM-5PM

## SCHLOSSER, TARA

Provider Gender: Female

License Number: MFC107868


NPI: 1407220437

 Provider English Spoken: Y  
Cultural Competency: N

TARA S SCHLOSSER

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## SERIO, TAYLOR

Provider Gender: Female


License Number: LCS107050

NPI: 1093217382

 Provider English Spoken: Y  
Cultural Competency: N

TAYLOR L SERIO


 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## SERIO, TAYLOR

Provider Gender: Female


License Number: LCS107050

NPI: 1093217382

 Provider English Spoken: Y  
Cultural Competency: N

TAYLOR L SERIO

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## SHU, I WEI

Provider Gender: Male


License Number: A103813

NPI: 1992840144

 Provider English Spoken: Y  
Cultural Competency: N

I WEI SHU

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (858) 534-6200

Fax: (858) 534-6205

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## SILVEY, CHRISTOPHER

Provider Gender: Male

License Number: LCS85942


NPI: 1932793502

 Provider English Spoken: Y  
Cultural Competency: N


CHRISTOPHER J SILVEY

 10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

 Phone: (858) 578-4220

Fax: (858) 578-4417

 After Hours Phone: (858) 578-4220

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## SOLORIO JR, ROBERTO

Provider Gender: Male


License Number: LCS102729


NPI: 1972088185

 Provider English Spoken: Y  
Cultural Competency: N

ROBERTO SOLORIO JR

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

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# I. 精神健康名录

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **SUAREZ, ROBERTO**

*Provider Gender: Male*


*License Number: MFC25098*

*NPI: 1386785160*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**ROBERTO SUAREZ**

 3025 BEYER BLVD  
SAN DIEGO, CA 92154

 *Phone: (619) 662-4100*  
*Fax: (619) 662-4119*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **SWEIGERT, JAMIE**

*Provider Gender: Female*


*License Number: LCS112304*

*NPI: 1396353595*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**JAMIE L SWEIGERT**

 2630 1ST AVE  
SAN DIEGO, CA 92103


 *Phone: (619) 234-2158*  
*Fax: (619) 234-0505*

 *After Hours Phone: (619) 234-2158*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Language(s) Spoken: Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **TARLE, STEPHANIE**

*Provider Gender: Female*


*License Number: PSY32155*

*NPI: 1659920403*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**STEPHANIE J TARLE**

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*  
*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **TILTON, PETER**

*Provider Gender: Male*


*License Number: G27781*

*NPI: 1538258694*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

**PETER A TILTON**

 2630 1ST AVE  
SAN DIEGO, CA 92103

 *Phone: (619) 234-2158*  
*Fax: (619) 234-0505*

 *After Hours Phone: (619) 234-2158*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*


*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

## **TO, TUAN**





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# I. 精神健康名录

*Provider Gender: Male*  
*License Number: PSY30204*  
*NPI: 1255696183*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
TUAN TO






 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 *Phone: (858) 279-0925*  
*Fax: (858) 633-4680*  
 *After Hours Phone: (858) 279-0925*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*


## **TO, TUAN**

*Provider Gender: Male*  
*License Number: PSY30204*  
*NPI: 1255696183*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
TUAN TO  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 *Phone: (858) 810-8700*  
*Fax: (858) 633-4680*  
 *After Hours Phone: (858) 810-8700*








 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

## **TO, TUAN**



*Provider Gender: Male*  
*License Number: PSY30204*  
*NPI: 1255696183*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
TUAN TO  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 *Phone: (619) 563-0250*  
*Fax: (858) 633-4681*  
 *After Hours Phone: (619) 563-0250*  
 *Website: N/A*

*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

## **TROYER, EMILY**






*Provider Gender: Female*  
*License Number: A149101*  
*NPI: 1326484437*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
EMILY A TROYER  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 *Phone: (619) 563-0250*  
*Fax: (858) 633-4681*  
 *After Hours Phone: (619) 563-0250*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-2PM*

## **TROYER, EMILY**






*Provider Gender: Female*  
*License Number: A149101*  
*NPI: 1326484437*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
EMILY A TROYER  
 4305 UNIVERSITY AVE STE 150  
SAN DIEGO, CA 92105



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# I. 精神健康名录



 Phone: (619) 280-2058  
Fax: (858) 633-4682  
 After Hours Phone: (619) 280-2058  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 8AM-2PM






## **TWAMLEY, ELIZABETH**

Provider Gender: Female  
License Number: PSY19150  
NPI: 1700089141  
 Provider English Spoken: Y  
Cultural Competency: N  
ELIZABETH W TWAMLEY  
 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
Fax: (619) 687-1067  
 After Hours Phone: (619) 233-8500  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender








restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W 8:30AM-5PM TH 8:30AM-9PM F 8:30AM-5PM

## **WEISSMAN, CORY**





Provider Gender: Male  
License Number: A174625  
NPI: 1528720661  
 Provider English Spoken: Y  
Cultural Competency: N  
CORY R WEISSMAN  
 16918 DOVE CANYON RD  
STE 100  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

## **WU, MICHELLE**

Provider Gender: Female  
License Number: A125139  
NPI: 1043650088  
 Provider English Spoken: Y  
Cultural Competency: N  
MICHELLE L WU  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8145  
Fax: (858) 966-8164  
 After Hours Phone: (858) 966-8145  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\19  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

## **YAGUDAYEVA, RAISA**

Provider Gender: Female  
License Number: 20A14848  
NPI: 1942555990  
 Provider English Spoken: Y  
 Russian  
Cultural Competency: N  
RAISA YAGUDAYEVA  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

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# I. 精神健康名录

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

## YIDI, DIANA

Provider Gender: Female

License Number: LCS110300

NPI: 1194438663

🗨 Provider English Spoken: Y

🗨 Spanish

Cultural Competency: N

DIANA L YIDI

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

📞 Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): License Number: LCS28729  
NPI: 1811449077

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F  
8:30AM-5:30PM

## ZAYAS, MARIO

Provider Gender: Male

License Number: MFC111273

NPI: 1275943557

🗨 Provider English Spoken: Y  
Cultural Competency: N

MARIO E ZAYAS

📍 3025 BEYER BLVD STE  
E-101

SAN DIEGO, CA 92154

📞 Phone: (619) 662-4100

Fax: (619) 428-5535

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU 9AM-7PM  
W-F 9AM-6PM

## ZIMMERMAN, JENNIFER

Provider Gender: Female

🗨 Provider English Spoken: Y  
Cultural Competency: N

JENNIFER A ZIMMERMAN

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

📞 Phone: (858) 279-9676

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-9676

🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y

🗨 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## ZIMMERMAN, JENNIFER

Provider Gender: Female

License Number: LCS28729

NPI: 1811449077

🗨 Provider English Spoken: Y  
Cultural Competency: N

JENNIFER A ZIMMERMAN

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111






📞 Phone: (858) 810-8700

Fax: (858) 633-4680

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# I. 精神健康名录

 After Hours Phone: (858) 810-8700  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
 Site Language(s) Spoken: Spanish  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM


## SAN MARCOS




### ALTAMIRANO, LEON



Provider Gender: Male  
License Number: PSY23734  
NPI: 1619271517  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
LEON ALTAMIRANO  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-8740  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### ARIELLA, LYND A









Provider Gender: Female  
License Number: PSY19450  
NPI: 1073518965  
 Provider English Spoken: Y  
Cultural Competency: N  
LYND A R ARIELLA  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
 Site Language(s) Spoken: Spanish  
TDD: U





Min/Max Age: 5\50  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### CABREJOS, CLAUDIO

Provider Gender: Male

License Number: A71653  
NPI: 1033133483  
 Provider English Spoken: Y  
 Portuguese, Spanish  
Cultural Competency: N  
CLAUDIO O CABREJOS  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-6744  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 18\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM



### FLYNN, DANIELLE

Provider Gender: Female  
License Number: PSY26184  
NPI: 1477785137  
 Provider English Spoken: Y  
Cultural Competency: N  
DANIELLE I FLYNN  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-8740  
 After Hours Phone: (760)

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# I. 精神健康名录





736-6767



 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## GEORGIEV, MARY JO



Provider Gender: Female  
License Number: PSY17954  
NPI: 1518996875  
 Provider English Spoken: Y  
Cultural Competency: N  
MARY-JO GEORGIEV  
 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 737-6767  
Fax: (760) 736-8740  
 After Hours Phone: (760) 737-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## IMAM, SYED







Provider Gender: Male  
License Number: PSY27695  
NPI: 1447428271  
 Provider English Spoken: Y  
 Hindi  
Cultural Competency: N  
SYED IMAM  
 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 566-1501  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
 Site Language(s) Spoken: Spanish  
TDD: U

Min/Max Age: 15\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

## REEG, JESSICA

Provider Gender: Female  
License Number: MFC124306  
NPI: 1144382987  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N

JESSICA REEG

 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 566-1501  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-8PM  
SA 8AM-5PM

## SIMPSON, ERIC

Provider Gender: Male  
License Number: PSY28885  
NPI: 1710110416  
 Provider English Spoken: Y  
Cultural Competency: N  
ERIC SIMPSON  
 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-8740  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y

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# I. 精神健康名录

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **SOLORIO JR, ROBERTO**

Provider Gender: Male


License Number: LCS102729

NPI: 1972088185

 Provider English Spoken: Y  
Cultural Competency: N

ROBERTO SOLORIO JR

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **TONG, GARRICK**

Provider Gender: Male


License Number: A102192

NPI: 1831361278

 Provider English Spoken: Y  
Cultural Competency: N

GARRICK G TONG

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-8PM  
SA 8AM-5PM

## **TORRES, HECTOR**

Provider Gender: Male

License Number: PSY13309


NPI: 1720265614

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

HECTOR M TORRES

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **SAN YSIDRO**

### **BALTRUS, JUSTINE ANN**


Provider Gender: Female


License Number: MFC132018

NPI: 1285040709

 Provider English Spoken: Y  
Cultural Competency: N

JUSTINE ANN A BALTRUS

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender restriction


American Sign Language (ASL):

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# I. 精神健康名录

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## **CRAWFORD-DAY, ANN**

Provider Gender: Female

License Number: A166646

NPI: 1386149706


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

ANN E CRAWFORD-DAY

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-2PM

## **DEPAOLO, AMANDA**


Provider Gender: Female


License Number: LCS99056

NPI: 1215420138


 Provider English Spoken: Y  
Cultural Competency: N

AMANDA L DEPAOLO

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## **DIA, ALI**

Provider Gender: Male

License Number: A47803

NPI: 1912031030


 Provider English Spoken: Y

 Arabic, Turkish

Cultural Competency: N

ALI R DIA

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

## **FONTANA, LOUIS**


Provider Gender: Male


License Number: G49072

NPI: 1780734343

 Provider English Spoken: Y  
Cultural Competency: N

LOUIS A FONTANA

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



# I. 精神健康名录

**PROVIDER**  
Hours: M-F 8AM-8PM  
SA 8AM-2PM

## **GONZALEZ-GARCIA, CAROLINA**

Provider Gender: Female  
License Number: MFC41111  
NPI: 1215321955

Provider English Spoken: Y  
Spanish

Cultural Competency: N

CAROLINA GONZALES  
GARCIA

3364 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 565-2373

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **IBANEZ, BERENICE**

Provider Gender: Female  
License Number: PSY22080  
NPI: 1740394386

Provider English Spoken: Y

Spanish

Cultural Competency: N

BERENICE B IBANEZ

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

## **JAMES, CHRISTINE**

Provider Gender: Female

License Number: 20A13931

NPI: 1679834022

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE E JAMES

1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **JENNINGS, AMY**

Provider Gender: Female

License Number: LCS100075

NPI: 1609549161

Provider English Spoken: Y

Cultural Competency: N

AMY E JENNINGS

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction


American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

 Hours: M-F 8AM-8PM  
SA 8AM-2PM

## **JIMENEZ, NANCY**

Provider Gender: Female


License Number: MFC141209

NPI: 1568023596

 Provider English Spoken: Y  
Cultural Competency: N

NANCY JIMENEZ

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **JOHNSON, JENNIFER**


Provider Gender: Female


License Number: PSY33295

NPI: 1023783248


 Provider English Spoken: Y  
Cultural Competency: N

JENNIFER JOHNSON

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\64

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **LOPEZ, MARIBEL**

Provider Gender: Female


License Number: LCS86171

NPI: 1669180600


 Provider English Spoken: Y  
Cultural Competency: N

MARIBEL, LOPEZ

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-2PM

## **PETERSEN, KATE**


Provider Gender: Female


License Number: MFC130200

NPI: 1598237281

 Provider English Spoken: Y  
Cultural Competency: N

KATE PETERSEN

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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# I. 精神健康名录

 Hours: M-F 8AM-5PM


## SANTEE

### MEAGHER, RAISHELLE

Provider Gender: Female

License Number: LCS109804


NPI: 1851821904

 Provider English Spoken: Y

Cultural Competency: N

RAISHELLE L MEAGHER

 120 TOWN CENTER PKWY  
SANTEE, CA 92071

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## VALLEY CENTER

### PLASCENCIA, CINDY

Provider Gender: Female

License Number: MFC113536


NPI: 1952723736

 Provider English Spoken: Y

Cultural Competency: N

CINDY PLASCENCIA

 28477 LIZARD ROCKS RD  
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)  
742-9919

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## VISTA

### ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304


NPI: 1255937496


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

AZUCENA ACOSTA

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

### ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304


NPI: 1255937496


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

AZUCENA ACOSTA

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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# I. 精神健康名录

🕒 Hours: M-TH 8AM-2PM  
F 8AM-5PM  
SA 9AM-6PM

## **BELL, JENNIFER**

Provider Gender: Female  
License Number: 20A20702  
NPI: 1154614956

🗨️ Provider English Spoken: Y  
Cultural Competency: N

JENNIFER L BELL

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎️ Phone: (760) 631-5000  
Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨️ Site Languages(s) Spoken:  
Chinese, Farsi, Estonian,  
Vietnamese, Hindi,  
Tagalog, French, Korean,  
Marathi, Spanish, Telugu

TDD: U

Min/Max Age: 5\80

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

## **BELL, JENNIFER**

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

🗨️ Provider English Spoken: Y  
Cultural Competency: N

JENNIFER L BELL

📍 134 GRAPEVINE RD  
VISTA, CA 92083

☎️ Phone: (760) 631-5000

Fax: (760) 414-3702

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨️ Site Languages(s) Spoken:  
Lithuanian, Urdu, Chinese,  
Vietnamese, Farsi, Tagalog,  
Arabic, Spanish

TDD: U

Min/Max Age: 5\80

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

## **BELL, JENNIFER**

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

🗨️ Provider English Spoken: Y  
Cultural Competency: N

JENNIFER L BELL

📍 1000 VALE TERRACE DR

VISTA, CA 92084

☎️ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗨️ Site Languages(s) Spoken:  
Chinese, Farsi, Estonian,  
Vietnamese, Hindi,  
Tagalog, French, Korean,  
Marathi, Spanish, Telugu

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT

🕒 Hours: M-F 8AM-5PM  
SA 9AM-4PM

## **CHRISTIANSON, WARREN**

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

🗨️ Provider English Spoken: Y

🗨️ Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎️ Phone: (760) 631-5000


Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000



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# I. 精神健康名录

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male  
License Number: 20A9664  
NPI: 1932359445  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N



WARREN R CHRISTIANSON II

 134 GRAPEVINE RD  
VISTA, CA 92083  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Website: N/A



Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):





N

 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male  
License Number: 20A9664  
NPI: 1932359445  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N



WARREN R CHRISTIANSON II

 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM


## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664  
NPI: 1932359445



 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
WARREN R CHRISTIANSON II

 134 GRAPEVINE RD  
VISTA, CA 92083  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U


Min/Max Age: 0\None  
Gender Restriction: No Gender restriction



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CRUZ, VANESSA

Provider Gender: Female  
License Number: LCS87166  
NPI: 1285170662

 Provider English Spoken: Y  
Cultural Competency: N  
VANESSA Y CRUZ

 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗃 Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu

TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU 8AM-8PM  
W 9AM-7PM  
TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

## **CRUZ, VANESSA**

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

🗃 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

🗃 Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU 8AM-8PM  
W 9AM-7PM  
TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

## **CRUZ, VANESSA**

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

🗃 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

📍 134 GRAPEVINE RD  
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-7PM  
F 9AM-5PM  
SA 9AM-4PM

## **CRUZ, VANESSA**

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

🗃 Provider English Spoken: Y  
Cultural Competency: N

VANESSA Y CRUZ

📍 134 GRAPEVINE RD  
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-7PM

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# I. 精神健康名录

F 9AM-5PM  
SA 9AM-4PM


## DOUGHERTY, CHRISTINE

Provider Gender: Female  
License Number: LCS26686  
NPI: 1003194960

 Provider English Spoken: Y  
Cultural Competency: N

CHRISTINE A DOUGHERTY

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


## DOUGHERTY, CHRISTINE

Provider Gender: Female  
License Number: LCS26686  
NPI: 1003194960

 Provider English Spoken: Y  
Cultural Competency: N

CHRISTINE A DOUGHERTY

 1000 VALE TERRACE DR  
VISTA, CA 92084


 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Chinese, Estonian, Farsi,  
French, Hindi, Korean,  
Marathi, Spanish, Telugu,  
Vietnamese, Tagalog

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 9AM-8PM  
F 9AM-5PM  
SA 9AM-4PM

## MENDEZ, ADRIANA


Provider Gender: Female  
License Number: LCS86435  
NPI: 1356777361

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None



Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## MENDEZ, ADRIANA



Provider Gender: Female  
License Number: LCS86435  
NPI: 1356777361

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM

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# I. 精神健康名录

SA 9AM-4PM

## MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

☐ Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## MEYERHOF, GRETA

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

☐ Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

📍 134 GRAPEVINE RD

VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

☐ Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

📍 134 GRAPEVINE RD

VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Arabic, Chinese, Lithuanian,  
Farsi, Spanish, Tagalog,  
Urdu, Vietnamese

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-4PM

## NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

☐ Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

## PATEL, MITESH

Provider Gender: Male

License Number: A181164

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

NPI: 1568880292

 Provider English Spoken: Y  
Cultural Competency: N

MITESH K PATEL

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

## **PATEL, MITESH**

Provider Gender: Male


License Number: A181164

NPI: 1568880292

 Provider English Spoken: Y  
Cultural Competency: N

MITESH K PATEL

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM


SA 9AM-4PM

## **SANCHEZ, ADRIANA**

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451


 Provider English Spoken: Y

 Spanish

Cultural Competency: N


ADRIANA SANCHEZ

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

## **SANCHEZ, ADRIANA**

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

ADRIANA SANCHEZ

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

## **SLOAN, CRISTINA**

Provider Gender: Female

License Number: MFC137279


NPI: 1912456377


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# I. 精神健康名录


 *Provider English Spoken: Y*  
*Cultural Competency: N*

CRISTINA I SLOAN

 1000 VALE TERRACE DR  
VISTA, CA 92084


 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken:*  
*Spanish*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SLOAN, CRISTINA**

*Provider Gender: Female*


*License Number: MFC137279*

*NPI: 1912456377*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

CRISTINA I SLOAN

 1000 VALE TERRACE DR  
VISTA, CA 92084


 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken:*  
*Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SLOAN, CRISTINA**

*Provider Gender: Female*


*License Number: MFC137279*

*NPI: 1912456377*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

CRISTINA I SLOAN


 134 GRAPEVINE RD  
VISTA, CA 92083

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*  
*Site English Spoken: Y*

 *Site Languages(s) Spoken:*  
*Spanish*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SMITH, SONYA**

*Provider Gender: Female*

*License Number: LCS82598*

*NPI: 1902070857*


 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

SONYA L SMITH

 1000 VALE TERRACE DR  
VISTA, CA 92084

 *Phone: (760) 631-5000*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*  
*PROVIDER*

## **SMITH, SONYA**

*Provider Gender: Female*

*License Number: LCS82598*

*NPI: 1902070857*

 *Provider English Spoken: Y*

 *Spanish*

*Cultural Competency: N*


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# I. 精神健康名录

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SONYA L SMITH

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

**WILSON, CARLENE**

Provider Gender: Female


License Number: LCS74685

NPI: 1508327081

 Provider English Spoken: Y  
Cultural Competency: N

CARLENE WILSON

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

**WILSON, CARLENE**

Provider Gender: Female


License Number: LCS74685

NPI: 1508327081

 Provider English Spoken: Y  
Cultural Competency: N

CARLENE WILSON

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

### ALPINE

#### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM

TU 10AM-6PM

W 9AM-5PM

TH 8AM-5PM

F 9AM-4PM

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM

TU 10AM-6PM

W 9AM-5PM

TH 8AM-5PM

F 9AM-4PM

#### BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM

TU 10AM-6PM

W 9AM-5PM

TH 8AM-5PM

F 9AM-4PM

#### DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

- N**  
♿ **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1U  
🕒 **Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM**
- DYER, SHARON, OD**  
Provider Gender: Female  
License Number: 33450  
NPI: 1063866887  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
📞 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1U  
🕒 **Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM**
- KALBAKJI, NATALY, OD**  
Provider Gender: Female  
License Number: 34943  
NPI: 1700556438  
Provider English Spoken: Y  
📄 Arabic  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
📞 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1U  
🕒 **Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM**
- KATZMAN, BARRY, MD**  
Provider Gender: Male  
License Number: A34834
- KHALIL, VADY, OD**  
Provider Gender: Male  
License Number: 35137  
NPI: 1275263584  
Provider English Spoken: Y  
📄 Arabic  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
📞 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1U  
🕒 **Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM**
- NPI: 1760473797**  
Provider English Spoken: Y  
📄 Spanish  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
📞 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
🕒 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **KHIEU, TINA, OD**

Provider Gender: Female  
License Number: 34777  
NPI: 1962031617  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
🕒 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **MARR, RYAN, OD**

Provider Gender: Male  
License Number: 35302  
NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
🕒 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within

1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **MCGRAW, JOSEPH, MD**

Provider Gender: Male  
License Number: A155228  
NPI: 1588624852  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
🕒 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **PATEL, GITANE, MD**

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **PATEL, SARJAN, MD**

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **PRABHU, SUJATA, MD**

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE


 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667


Provider English Spoken: Y

 Spanish

Cultural Competency: Y

WEST COAST EYE CARE


 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### ZAIDI, NOORINA, OD

Provider Gender: Female


License Number: 35615


NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE


 1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

## BONITA

### CHA, DANIEL, OD

Provider Gender: Male

License Number: 14779

NPI: 1386078020






Provider English Spoken: Y

 Spanish


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## J. 眼科提供者名录 - 眼科和视力服务


*Cultural Competency: Y*  
**EYECARE OF BONITA**  
 4502 BONITA RD  
 BONITA, CA 91902  
 Phone: (619) 479-7334  
 Fax: (619) 475-3456  
 After Hours Phone: (619)  
 479-7334  
*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
 restriction*  
*American Sign Language (ASL):  
 N*  
 Accessibility: CONTACT  
 PROVIDER  
*Public transportation (within  
 1/2 mile from Site): 1T*  
 Hours: M 8AM-6:30PM  
 W 8AM-6PM  
 TH 12:30AM-6PM  
 F 8AM-6PM  
 SA 9AM-2PM





### CARLSBAD

**HO, TRAM, OD**  
*Provider Gender: Female*  
*License Number: 13485*  
*NPI: 1245464460*  
*Provider English Spoken: Y*  
 Vietnamese  
*Cultural Competency: Y*  
**EYE STYLE OPTOMETRY**  
 5814 VAN ALLEN WAY STE

146  
 CARLSBAD, CA 92008  
 Phone: (760) 606-2020  
 After Hours Phone: (760)  
 606-2020  
*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish, Vietnamese  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
 restriction*  
*American Sign Language (ASL):  
 N*  
 Accessibility: CONTACT  
 PROVIDER  
*Public transportation (within  
 1/2 mile from Site): 1U*  
 Hours: TU 9AM-5PM  
 W 10AM-6PM  
 TH 9AM-5PM  
 F 8AM-4PM  
 SA 9AM-3PM

### CHULA VISTA

**CASTILLEJOS, DAVID, MD**  
*Provider Gender: Male*  
*License Number: A44482*  
*NPI: 1558446401*  
*Provider English Spoken: Y*  
 French, Portuguese,  
 Spanish, Tagalog  
*Cultural Competency: Y*  
**CASTILLEJOS EYE INSTITUTE  
 MED GROUP**  
 342 F ST  
 CHULA VISTA, CA 91910

 Phone: (619) 422-1471  
 Fax: (619) 271-7044  
 After Hours Phone: (619)  
 422-1471  
*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 French, Spanish, Tagalog  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
 restriction*  
*American Sign Language (ASL):  
 N*  
 Accessibility: CONTACT  
 PROVIDER  
*Public transportation (within  
 1/2 mile from Site): 1T*  
 Hours: M 8AM-5PM  
 TU 7AM-5PM  
 W-F 8AM-5PM

**CASTILLEJOS, MARIA, MD**  
*Provider Gender: Female*  
*License Number: A37652*  
*NPI: 1043395098*  
*Provider English Spoken: Y*  
 Spanish  
*Cultural Competency: Y*  
**CASTILLEJOS EYE INSTITUTE  
 MED GROUP**  
 342 F ST  
 CHULA VISTA, CA 91910  
 Phone: (619) 422-1471  
 Fax: (619) 271-7044  
 After Hours Phone: (619)  
 422-1471  
*Accepting New Patients: Yes*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
 Site Languages(s) Spoken: French, Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M 8AM-5PM  
 TU 7AM-5PM  
 W-F 8AM-5PM

### CHAN, KWOK FUNG, OD

Provider Gender: Male  
 License Number: 35087  
 NPI: 1407508385  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 VILLA OPTOMETRY INC

531 TELEGRAPH CANYON RD  
 CHULA VISTA, CA 91910  
 Phone: (619) 482-2020  
 Fax: (619) 482-2671

After Hours Phone: (619) 482-2020

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): M-F 9AM-7PM  
 SA 9AM-5PM

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-6PM

### CHISHOLM, KAREN, OD

License Number: 35450

NPI: 1568155190

Provider English Spoken: Y

Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM

### HUANG, PETER, OD

Provider Gender: Male

License Number: 11659

NPI: 1639100522

Provider English Spoken: Y

Spanish

Cultural Competency: Y

PETER D HUANG OD INC

557 H ST

CHULA VISTA, CA 91910

Phone: (619) 422-0139

Fax: (619) 422-0066

After Hours Phone: (619) 422-0139

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9AM-5PM

TU 9AM-6PM

W 9AM-5PM

TH 9AM-6PM

F 8AM-4PM

SA 9AM-2PM

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## J. 眼科提供者名录 - 眼科和视力服务

### **KALRA, ANKUR, OD**

Provider Gender: Male

License Number: 11898

NPI: 1124195789


Provider English Spoken: Y

 Hindi


Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915


 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### **KEDDINGTON, JOAN, OD**

Provider Gender: Female

License Number: 6263

NPI: 1992872691


Provider English Spoken: Y

 Spanish


Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915


 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### **KING, MARY, OD**

Provider Gender: Female

License Number: 13711

NPI: 1578792107


Provider English Spoken: Y

 Spanish


Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915


 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### **MASCARENO, EFRAIN, OD**

Provider Gender: Male

License Number: 10906

NPI: 1457507279

Provider English Spoken: Y


Cultural Competency: Y

EASTLAKE VISION CENTER DR

MASCARENO

 2260 OTAY LAKES RD STE 111

CHULA VISTA, CA 91915

 Phone: (619) 421-5550

Fax: (619) 421-6022

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

- After Hours Phone: (619) 421-5550  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 9AM-6PM SA 9AM-3PM
- MASCARENO, EFRAIN, OD**  
 Provider Gender: Male  
 License Number: 10906  
 NPI: 1457507279  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 CLEAR VISION OPTOMETRY  
 DR MASCARENO  
 440 4TH AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 427-2020  
 Fax: (866) 254-5707  
 After Hours Phone: (619) 427-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None
- Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TH 9AM-6PM F 9AM-5PM
- NGUYEN, THERESA, OD**  
 Provider Gender: Female  
 License Number: 35530TLG  
 NPI: 1609555713  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 OTAY RANCH EYEWORKS  
 OPTOMETRY  
 1741 EASTLAKE PKWY STE 101  
 CHULA VISTA, CA 91915  
 Phone: (619) 421-6600  
 Fax: (619) 421-6006  
 After Hours Phone: (619) 421-6600  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Arabic, Hindi, Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER
- Public transportation (within 1/2 mile from Site): 1U  
 Hours: SU 10AM-4PM M-F 9AM-7PM SA 9AM-5PM
- NGUYEN, TRACY, OD**  
 Provider Gender: Female  
 License Number: 10859  
 NPI: 1265596621  
 Provider English Spoken: Y  
 Vietnamese  
 Cultural Competency: Y  
 ESSENTIAL EYECARE  
 OPTOMETRY  
 345 F ST STE 240  
 CHULA VISTA, CA 91910  
 Phone: (858) 467-0655  
 Fax: (619) 425-9797  
 After Hours Phone: (858) 467-0655  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Vietnamese  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TH 10AM-3PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

### **PLUCINIK, STANLEY, OD**

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE  
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)  
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 8AM-5PM

TU 7AM-5PM

W-F 8AM-5PM

### **SCOVILL, ALEXANDRA, OD**

Provider Gender: Female

License Number: 33711

NPI: 1184146094

Provider English Spoken: Y

Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE  
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)  
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 8AM-5PM

TU 7AM-5PM

W-F 8AM-5PM

### **SOLIS, KEVIN, OD**

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS  
OPTOMETRY

1741 EASTLAKE PKWY STE  
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)  
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: SU 10AM-4PM

M-F 9AM-7PM

SA 9AM-5PM

### **TOUBIA, ELIAS, OD**

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Arabic

Cultural Competency: Y

OTAY RANCH EYEWORKS  
OPTOMETRY

1741 EASTLAKE PKWY STE  
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)  
421-6600

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
 Site Languages(s) Spoken: Arabic, Hindi, Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: SU 10AM-4PM  
 M-F 9AM-7PM  
 SA 9AM-5PM

### VILLA, ANGELICA, OD

Provider Gender: Female  
 License Number: 10561  
 NPI: 1962544965  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y

### VILLA OPTOMETRY INC

531 TELEGRAPH CANYON RD  
 CHULA VISTA, CA 91910  
 Phone: (619) 482-2020  
 Fax: (619) 482-2671  
 After Hours Phone: (619) 482-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 9AM-6PM

## CORONADO

### COCKERHAM, KIMBERLY, MD

Provider Gender: Female  
 License Number: G86885  
 NPI: 1366493629  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ALVARADO EYE ASSOCIATES MED CLINIC INC  
 801 ORANGE AVE STE 204  
 CORONADO, CA 92118  
 Phone: (619) 437-4406  
 Fax: (619) 522-7983  
 After Hours Phone: (619) 437-4406  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M 9AM-4:30PM  
 TU 9AM-3PM  
 W-TH 9AM-4:30PM

### GRAY, IGA, MD

Provider Gender: Female  
 License Number: A174875  
 NPI: 1033538350  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ALVARADO EYE ASSOCIATES MED CLINIC INC  
 801 ORANGE AVE STE 204  
 CORONADO, CA 92118  
 Phone: (619) 437-4406  
 Fax: (619) 522-7983  
 After Hours Phone: (619) 437-4406

Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M 9AM-4:30PM  
 TU 9AM-3PM  
 W-TH 9AM-4:30PM

### KATZMAN, LEE, MD

Provider Gender: Male  
 License Number: A135673  
 NPI: 1912297284  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ALVARADO EYE ASSOCIATES

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### MED CLINIC INC

801 ORANGE AVE STE 204  
CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619)  
437-4406

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM  
TU 9AM-3PM  
W-TH 9AM-4:30PM

### MANNEN, JOSEPH, OD

Provider Gender: Male

License Number: 33650

NPI: 1851827034

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

801 ORANGE AVE STE 204  
CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619)  
437-4406

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM  
TU 9AM-3PM  
W-TH 9AM-4:30PM

### OU, JOCELYN, OD

Provider Gender: Female

License Number: 34063

NPI: 1225518996

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

801 ORANGE AVE STE 204  
CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619)  
437-4406

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM  
TU 9AM-3PM  
W-TH 9AM-4:30PM

### YOUNG, ALLA, OD

Provider Gender: Female

License Number: 34191

NPI: 1285085142

Provider English Spoken: Y

Russian

Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

801 ORANGE AVE STE 204  
CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619)  
437-4406

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-4:30PM  
TU 9AM-3PM  
W-TH 9AM-4:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

### EL CAJON

#### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese


Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200

EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

#### ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

#### BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716


Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

### **BUTLER, KIM, OD**

Provider Gender: Male

License Number: 6405

NPI: 1467444844

Provider English Spoken: Y

Cultural Competency: Y

KIM J BUTLER OD

1273 BROADWAY  
EL CAJON, CA 92021

Phone: (619) 579-2345

Fax: (619) 579-0876

After Hours Phone: (619)  
579-2345

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM  
SA 9AM-12AM

### **CHAN, KWOK FUNG, OD**

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

2650 JAMACHA RD STE 155  
EL CAJON, CA 92019

Phone: (619) 670-6296

Fax: (619) 670-8852

After Hours Phone: (619)  
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 9AM-5PM  
TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### **DEAN, MOENA, OD**

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200  
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8:30AM-6PM

### **DYER, SHARON, OD**

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200  
EL CAJON, CA 92020

Phone: (619) 440-5400

Fax: (619) 440-0239

After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction


American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 Hours: M-F 8:30AM-6PM

### **HAMOUIE, JUDY, OD**

Provider Gender: Female

License Number: 34984

NPI: 1518638287


Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **HAN, SULKI, OD**

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y


 Korean

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **HSU, CHRISTOPHER, MD**

Provider Gender: Male

License Number: A65973

NPI: 1336167618


Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **KATZMAN, BARRY, MD**

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y


Arabic

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **MARR, RYAN, OD**

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **MCMURREN, BRITTANY, OD**

Provider Gender: Female

License Number: 14824


NPI: 1104243815

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

 2650 JAMACHA RD STE 155  
EL CAJON, CA 92019

 Phone: (619) 670-6296

Fax: (619) 670-8852

 After Hours Phone: (619)  
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Italian, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M 9AM-5PM

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## J. 眼科提供者名录 - 眼科和视力服务

TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### **PANDYA, BHUMIKA, OD**

Provider Gender: Female

License Number: 35025

NPI: 1063182822


Provider English Spoken: Y

Hindi

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239


 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **PATEL, GITANE, MD**

Provider Gender: Male

License Number: A108603


NPI: 1710171434

Provider English Spoken: Y


Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **PATEL, SARJAN, MD**

Provider Gender: Male

License Number: A114976


NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish  
Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239


 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **SCOTT, JEFFREY, OD**

Provider Gender: Male

License Number: 34978


NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within

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## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

📄 Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### WERNER, R AARON, OD

Provider Gender: Male

License Number: 13478

NPI: 1821259458

Provider English Spoken: Y

📄 Spanish

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155 EL CAJON, CA 92019

☎ Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619) 670-6296

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Language(s) Spoken: Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM  
TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### WERNER, REX, OD

Provider Gender: Male

License Number: 9378

NPI: 1891760716

Provider English Spoken: Y

🗳 Site English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155  
EL CAJON, CA 92019

📞 Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619)  
670-6296

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:  
Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM  
TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200

EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

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## J. 眼科提供者名录 - 眼科和视力服务

American Sign Language (ASL): **AOTO, KIM, OD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### ENCINITAS

**ADAMS, MONA, OD**

Provider Gender: Female

License Number: 14457


NPI: 1942564521

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS HOSPITAL  
ENCINITAS

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

Provider Gender: Female

License Number: 14524


NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese  
Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

**BANSAL, PREETI, MD**

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y


Spanish

Cultural Competency: Y


RADY CHILDRENS HOSPITAL

ENCINITAS

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702


Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

**BAUMANN, DANIELA, OD**

Provider Gender: Female

License Number: 34530


NPI: 1982232146

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760)  
943-7141



Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:


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## J. 眼科提供者名录 - 眼科和视力服务






*Spanish*  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM






### **BHATIA, SHAGUN, MD**

Provider Gender: Female  
 License Number: A154902  
 NPI: 1104237353  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 RADY CHILDRENS HOSPITAL  
 ENCINITAS  
 477 N EL CAMINO REAL  
 STE D302  
 ENCINITAS, CA 92024  
 Phone: (858) 309-7702  
 Fax: (858) 966-7403  
 After Hours Phone: (858) 309-7702  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within

1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

### **CHANG, TOM, MD**

Provider Gender: Male  
 License Number: A69909  
 NPI: 1609848969  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM  
**CHIU, STEPHAN, MD**  
 Provider Gender: Male  
 License Number: A172634  
 NPI: 1053846956  
 Provider English Spoken: Y  
 Cultural Competency: Y

ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM




### **DEAN, MOENA, OD**

Provider Gender: Female  
 License Number: 33955  
 NPI: 1265927578  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141  
 Accepting New Patients: Yes  
 Site English Spoken: Y







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## J. 眼科提供者名录 - 眼科和视力服务








 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*








### **DYER, SHARON, OD**

*Provider Gender: Female*  
*License Number: 33450*  
*NPI: 1063866887*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 *Phone: (760) 943-7141*  
*Fax: (760) 943-0371*  
 *After Hours Phone: (760) 943-7141*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*

### **FISH, STEVEN, MD**

*Provider Gender: Male*  
*License Number: A164497*  
*NPI: 1760877120*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 *Phone: (760) 943-7141*  
*Fax: (760) 943-0371*  
 *After Hours Phone: (760) 943-7141*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*  
**HAMOUIE, JUDY, OD**  
*Provider Gender: Female*  
*License Number: 34984*  
*NPI: 1518638287*  
*Provider English Spoken: Y*

*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 *Phone: (760) 943-7141*  
*Fax: (760) 943-0371*  
 *After Hours Phone: (760) 943-7141*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*

### **HUDSON, HENRY, MD**

*Provider Gender: Male*  
*License Number: G76091*  
*NPI: 1851349195*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 *Phone: (760) 943-7141*  
*Fax: (760) 943-0371*  
 *After Hours Phone: (760) 943-7141*  
*Accepting New Patients: Yes*

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## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **KALBAKJI, NATALY, OD**

Provider Gender: Female  
License Number: 34943  
NPI: 1700556438  
Provider English Spoken: Y

Arabic  
Cultural Competency: Y  
ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
Fax: (760) 943-0371  
 After Hours Phone: (760)  
943-7141  
Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male  
License Number: 35137  
NPI: 1275263584  
Provider English Spoken: Y

Arabic  
Cultural Competency: Y  
ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
Fax: (760) 943-0371  
 After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777  
NPI: 1962031617  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
Fax: (760) 943-0371  
 After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **LEE, JASON, OD**

Provider Gender: Male  
License Number: 14881  
NPI: 1679985584  
Provider English Spoken: Y

Spanish  
Cultural Competency: Y  
RADY CHILDRENS HOSPITAL  
ENCINITAS

477 N EL CAMINO REAL  
STE D302

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## J. 眼科提供者名录 - 眼科和视力服务

ENCINITAS, CA 92024  
☎ Phone: (858) 309-7702  
Fax: (858) 966-7403  
📞 After Hours Phone: (858) 309-7702  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M-F 8AM-5PM

### MARR, RYAN, OD

Provider Gender: Male  
License Number: 35302  
NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
📍 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
☎ Phone: (760) 943-7141  
Fax: (760) 943-0371  
📞 After Hours Phone: (760) 943-7141  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
📄 Site Languages(s) Spoken: Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
🕒 Hours: M-F 8AM-5PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male  
License Number: A155228  
NPI: 1588624852  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
📍 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
☎ Phone: (760) 943-7141  
Fax: (760) 943-0371  
📞 After Hours Phone: (760) 943-7141  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
📄 Site Languages(s) Spoken: Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
🕒 Hours: M-F 8AM-5PM

### MOLL, ANGELA, MD

Provider Gender: Female  
License Number: A105472  
NPI: 1861648602  
Provider English Spoken: Y  
Cultural Competency: Y  
RADY CHILDRENS HOSPITAL  
ENCINITAS  
📍 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024  
☎ Phone: (858) 309-7702  
Fax: (858) 966-7403  
📞 After Hours Phone: (858) 309-7702  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M-F 8AM-5PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male  
License Number: A125435  
NPI: 1235366782  
Provider English Spoken: Y  
📄 Indonesian, Spanish  
Cultural Competency: Y

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## J. 眼科提供者名录 - 眼科和视力服务

### ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

German, Spanish

Cultural Competency: Y

### RADY CHILDRENS HOSPITAL ENCINITAS

477 N EL CAMINO REAL  
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT

### PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

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## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)

943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### ESCONDIDO

#### ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

#### RADY CHILDRENS

#### SPECIALISTS

2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F  
8:30AM-4:30PM

#### ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

#### ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

#### BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Spanish

Cultural Competency: Y

#### RADY CHILDRENS

#### SPECIALISTS

2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F  
8:30AM-4:30PM

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

#### ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

**American Sign Language (ASL): BERGMARK, JAMIE, OD**

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

**BEAUDRY, AMANDA, OD**

Provider Gender: Female

License Number: 33385

NPI: 1477903516

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes


 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F  
8:30AM-4:30PM**

Provider Gender: Female

License Number: 33657

NPI: 1669920757

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F  
8:30AM-4:30PM**

**BHATIA, SHAGUN, MD**

Provider Gender: Female

License Number: A154902

NPI: 1104237353

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY  
STE 200


ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

**American Sign Language (ASL):**

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F  
8:30AM-4:30PM**

**BINDER, NICHOLAS, MD**

Provider Gender: Male

License Number: A124698

NPI: 1306076716


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872



Accepting New Patients: Yes

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## J. 眼科提供者名录 - 眼科和视力服务




Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### CHANG, TOM, MD



Provider Gender: Male  
License Number: A69909  
NPI: 1609848969  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
Fax: (760) 743-5879  
 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### DUONG, KIM, OD

Provider Gender: Female  
License Number: 34222  
NPI: 1114448651  
Provider English Spoken: Y  
 Vietnamese  
Cultural Competency: Y  
RADY CHILDRENS



SPECIALISTS

 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
 Phone: (760) 755-7600  
Fax: (760) 755-7699  
 After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction




American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F  
8:30AM-4:30PM

### FISH, STEVEN, MD

Provider Gender: Male  
License Number: A164497  
NPI: 1760877120  
Provider English Spoken: Y  
Cultural Competency: Y


ACUITY EYE GROUP


 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
Fax: (760) 743-5879  
 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### GOLDSTONE, ADAM, OD

Provider Gender: Male  
License Number: 11051  
NPI: 1316972995  
Provider English Spoken: Y  
Cultural Competency: Y

ACUITY EYE GROUP



 700 W EL NORTE PKWY

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879  
 After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM





### HAMOUIE, JUDY, OD


Provider Gender: Female  
 License Number: 34984  
 NPI: 1518638287  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 700 W EL NORTE PKWY  
 STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879  
 After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:

Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### HSU, CHRISTOPHER, MD






Provider Gender: Male  
 License Number: A65973  
 NPI: 1336167618  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

 700 W EL NORTE PKWY  
 STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879  
 After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male  
 License Number: G76091  
 NPI: 1851349195  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

 700 W EL NORTE PKWY  
 STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879  
 After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### KALBAKJI, NATALY, OD

Provider Gender: Female  
 License Number: 34943  
 NPI: 1700556438

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y


 Arabic

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **KARAPETIAN, ELENA, OD**

Provider Gender: Female

License Number: 34514

NPI: 1184250417


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y


 Arabic

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 Hours: M-F 8AM-5PM

### **KIM, PHILIP, OD**

Provider Gender: Male

License Number: 33893

NPI: 1376929034


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **KLAREN, AMANDA, OD**

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F  
8:30AM-4:30PM

### **LE, TAM, OD**

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y


Spanish, Vietnamese

Cultural Competency: Y

TAM T LE OD INC

 1711 E VALLEY PKWY STE  
109

ESCONDIDO, CA 92027

 Phone: (760) 737-6064

Fax: (760) 737-6064

 After Hours Phone: (760)

737-6064

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-TH 9AM-5:30PM  
F 9AM-1PM

### **LEE, JASON, OD**

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Spanish


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务


restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-4:30PM

### MARR, RYAN, OD

Provider Gender: Male


License Number: 35302


NPI: 1235857525

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male


License Number: A155228


NPI: 1588624852

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472


NPI: 1861648602


Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS


 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

 Site English Spoken: Y Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-4:30PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male


License Number: A125435


NPI: 1235366782

Provider English Spoken: Y

 Indonesian, Spanish Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

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## J. 眼科提供者名录 - 眼科和视力服务

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **MOVAGHAR, MANSOOR, MD**

Provider Gender: Male

License Number: A100897

NPI: 1497792220

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): 8:30AM-4:30PM  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-4:30PM

### **O HALLORAN, HENRY, MD**

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

German, Spanish


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): 8:30AM-4:30PM  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

### **PANSARA, MEGHA, MD**

Provider Gender: Female

License Number: A143429

NPI: 1184983728

Provider English Spoken: Y

Gujarati


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-4:30PM

### **PATEL, SARJAN, MD**

Provider Gender: Male


License Number: A114976

NPI: 1316199326


Provider English Spoken: Y


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

 Gujarati, Hindi, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP


 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026

 Phone: (760) 743-5872  
Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **PATEL, GITANE, MD**

Provider Gender: Male


License Number: A108603


NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP


 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026

 Phone: (760) 743-5872  
Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **PRABHU, SUJATA, MD**

Provider Gender: Female

License Number: A115965


NPI: 1982872552


Provider English Spoken: Y

 Spanish

Cultural Competency: Y

ACUITY EYE GROUP


 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026

 Phone: (760) 743-5872  
Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender

restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **SAMUEL, MICHAEL, MD**

Provider Gender: Male


License Number: A83237


NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP


 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026

 Phone: (760) 743-5872  
Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **THACH, TERILYN, OD**

Provider Gender: Female

License Number: 11456

NPI: 1710030861

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

INSIGHT VISION OPTOMETRY

2419 E VALLEY PKWY  
ESCONDIDO, CA 92027

Phone: (760) 738-9931

Fax: (760) 888-2181

After Hours Phone: (760)  
738-9931

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 9:30AM-5PM  
TH 10AM-6PM  
F 9:30AM-5PM

### **TON-NU, MY LINH, OD**

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **TRAN, ALEXANDER, OD**

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F  
8:30AM-4:30PM

### **VERRET, ERIC, OD**

Provider Gender: Male

License Number: 11401

NPI: 1194891853

Provider English Spoken: Y

French, Spanish

Cultural Competency: Y

ESCONDIDO EYECARE

613 E GRAND AVE  
ESCONDIDO, CA 92025

Phone: (760) 747-7979

Fax: (760) 747-7799

After Hours Phone: (760)  
747-7979

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, French, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

American Sign Language (ASL):  Hours: M-F 8AM-5PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 9AM-6PM  
W-TH 9AM-8PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y


 Spanish

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

### ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes



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## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

### FALLBROOK

#### ARCHIBALD, JOHN, OD

Provider Gender: Male  
License Number: 11813  
NPI: 1902893357  
Provider English Spoken: Y  
Cultural Competency: Y  
INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
FALLBROOK, CA 92028  
 Phone: (760) 728-5728  
Fax: (760) 728-5934



 After Hours Phone: (760)  
728-5728

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish



Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

#### COLEMAN, BROOKE, OD

Provider Gender: Female  
License Number: 13551  
NPI: 1700040748  
Provider English Spoken: Y  
Cultural Competency: Y  
INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
FALLBROOK, CA 92028  
 Phone: (760) 728-5728  
Fax: (760) 728-5934



 After Hours Phone: (760)  
728-5728

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

#### CONNOR, JEFFREY, OD

Provider Gender: Male  
License Number: 33683


NPI: 1063968980

Provider English Spoken: Y

Spanish  
Cultural Competency: Y

INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
FALLBROOK, CA 92028

 Phone: (760) 728-5728  
Fax: (760) 728-5934

 After Hours Phone: (760)  
728-5728



Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM


#### COOPER, MICHAEL, OD

Provider Gender: Male  
License Number: 10476  
NPI: 1164586244

Provider English Spoken: Y  
Cultural Competency: Y

INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
FALLBROOK, CA 92028

 Phone: (760) 728-5728  
Fax: (760) 728-5934

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

 After Hours Phone: (760) 728-5728

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### **DUONG, CHERYL, OD**

Provider Gender: Female

License Number: 34070


NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102 FALLBROOK, CA 92028

 Phone: (760) 728-5728

Fax: (760) 728-5934

 After Hours Phone: (760) 728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### **GEORGE, KENDALL, OD**

Provider Gender: Male

License Number: 34270

NPI: 1619529948


Provider English Spoken: Y

Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

 1102 S MAIN AVE FALLBROOK, CA 92028

 Phone: (760) 723-8417

Fax: (760) 758-2063

 After Hours Phone: (760) 723-8417

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 1PM-5PM TU-W 9AM-6PM

TH-F 9AM-5PM  
SA 9AM-1PM

### **GEORGE, BRUCE, OD**

Provider Gender: Male

License Number: 7696

NPI: 1356414551


Provider English Spoken: Y

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

 1102 S MAIN AVE FALLBROOK, CA 92028

 Phone: (760) 723-8417

Fax: (760) 758-2063

 After Hours Phone: (760) 723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 1PM-5PM  
TU-W 9AM-6PM  
TH-F 9AM-5PM  
SA 9AM-1PM

### **KHINDA, SUNEHA, OD**

Provider Gender: Female

License Number: 35494

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## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102  
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)  
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### TEW, JOHN, MD

Provider Gender: Male

License Number: A83206

NPI: 1174593354

Provider English Spoken: Y

Portuguese

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102  
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)  
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### IMPERIAL BEACH

#### HANONO, HELFON, OD

Provider Gender: Male

License Number: 6681

NPI: 1619942034

Provider English Spoken: Y

Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

894 PALM AVE STE B  
IMPERIAL BEACH, CA  
91932

Phone: (619) 424-9333

Fax: (619) 424-3356

After Hours Phone: (619)  
424-9333

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 9AM-6PM

#### HANONO, ABRAHAM, OD

Provider Gender: Male

License Number: 14900

NPI: 1356754741

Provider English Spoken: Y

Hebrew, Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

894 PALM AVE STE B  
IMPERIAL BEACH, CA  
91932

Phone: (619) 424-9333

Fax: (619) 424-3356

After Hours Phone: (619)  
424-9333

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None



Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 9AM-6PM*

### LA JOLLA


#### **BAUMANN, DANIELA, OD**

*Provider Gender: Female*  
*License Number: 34530*  
*NPI: 1982232146*

*Provider English Spoken: Y*  
*Cultural Competency: Y*

#### ACUITY EYE GROUP


 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037  
 *Phone: (858) 457-3010*  
*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*


#### **CHIU, STEPHAN, MD**

*Provider Gender: Male*  
*License Number: A172634*  
*NPI: 1053846956*

*Provider English Spoken: Y*  
*Cultural Competency: Y*

#### ACUITY EYE GROUP


 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037  
 *Phone: (858) 457-3010*  
*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*

#### **CODEN, DANIEL, MD**

*Provider Gender: Male*  
*License Number: G57587*  
*NPI: 1942317508*


*Provider English Spoken: Y*  
*Cultural Competency: Y*

#### ACUITY EYE GROUP

 9850 GENESEE AVE STE

310


LA JOLLA, CA 92037

 *Phone: (858) 457-3010*  
*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*


#### **DEAN, MOENA, OD**

*Provider Gender: Female*  
*License Number: 33955*  
*NPI: 1265927578*

*Provider English Spoken: Y*  
*Cultural Competency: Y*

#### ACUITY EYE GROUP

 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037  
 *Phone: (858) 457-3010*  
*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken:*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## J. 眼科提供者名录 - 眼科和视力服务

*Spanish, Tagalog*  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U


 Hours: M-F 8AM-4:30PM


### DYER, SHARON, OD

Provider Gender: Female  
 License Number: 33450  
 NPI: 1063866887

Provider English Spoken: Y  
 Cultural Competency: Y

### ACUITY EYE GROUP

 9850 GENESEE AVE STE 310  
 LA JOLLA, CA 92037

 Phone: (858) 457-3010  
 Fax: (858) 457-0028

 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### HO, AMIEE, OD

Provider Gender: Female

License Number: 14527


NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

### UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093

 Phone: (858) 534-6290  
 Fax: (858) 732-0921

 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM  
 SA 8AM-2PM

### HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y


Cultural Competency: Y

### PERLMAN

### OPHTHALMOLOGY-UCSD

 9350 CAMPUS POINT DR  
 STE 1B

LA JOLLA, CA 92037

 Phone: (858) 534-6290  
 Fax: (858) 732-0921

 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-4:30PM

### HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010


Provider English Spoken: Y

Spanish

Cultural Competency: Y

### UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093

 Phone: (858) 534-6290  
 Fax: (858) 732-0921

 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

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## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

### **HOO, PAMELA, OD**

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

Spanish

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

### **HUDSON, HENRY, MD**

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### **HUSTANA, LARA, OD**

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

### **HUSTANA, LARA, OD**

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM SA 8AM-2PM

### **KALBAKJI, NATALY, OD**

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

☐ Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

☐ Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### **KIM, PHILIP, OD**

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)  
534-6290

*Accepting New Patients: Yes*

🗣 *Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

N

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1U*

🕒 *Hours: M-F 8AM-4:30PM  
SA 8AM-2PM*

### **KIM, PHILIP, OD**

*Provider Gender: Male*

*License Number: 33893*

*NPI: 1376929034*

*Provider English Spoken: Y*

*Cultural Competency: Y*

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)  
534-6290

*Accepting New Patients: Yes*

🗣 *Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*  
N

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1T*

🕒 *Hours: M-F 8AM-4:30PM*

### **KULISCHAK, JOHN, OD**

*Provider Gender: Male*

*License Number: 9279*

*NPI: 1740205236*

*Provider English Spoken: Y*

*Cultural Competency: Y*

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)  
534-6290

*Accepting New Patients: Yes*

🗣 *Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*  
N

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1T*

🕒 *Hours: M-F 8AM-4:30PM*

### **KULISCHAK, JOHN, OD**

*Provider Gender: Male*

*License Number: 9279*

*NPI: 1740205236*

*Provider English Spoken: Y*

*Cultural Competency: Y*

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)  
534-6290

*Accepting New Patients: Yes*

🗣 *Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*  
N

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1U*

🕒 *Hours: M-F 8AM-4:30PM  
SA 8AM-2PM*

### **LAM, ANNE, OD**

*Provider Gender: Female*

*License Number: 12810*

*NPI: 1174550768*

*Provider English Spoken: Y*

*Cultural Competency: Y*

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## J. 眼科提供者名录 - 眼科和视力服务

### UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

### LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

### PERLMAN

### OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

### LUSBY, FRANKLIN, MD

Provider Gender: Male

License Number: G41830

NPI: 1265526180

Provider English Spoken: Y

Cultural Competency: Y

### LUSBY VISION INSTITUTE

9850 GENESEE AVE STE  
220

LA JOLLA, CA 92037

Phone: (858) 459-6200

Fax: (858) 459-2025

After Hours Phone: (858)  
459-6200

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM

### MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y

Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*  
**PERLMAN**  
 OPHTHALMOLOGY-UCSD  
 9350 CAMPUS POINT DR  
 STE 1B  
 LA JOLLA, CA 92037  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921  
 After Hours Phone: (858) 534-6290  
*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-4:30PM

### **MIZOGUCHI, LIANNE, OD**

*Provider Gender: Female*  
*License Number: 10104*  
*NPI: 1619900313*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**PERLMAN**

OPHTHALMOLOGY-UCSD  
 9350 CAMPUS POINT DR  
 STE 1B  
 LA JOLLA, CA 92037  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921  
 After Hours Phone: (858)

534-6290  
*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-4:30PM

### **MIZOGUCHI, LIANNE, OD**

*Provider Gender: Female*  
*License Number: 10104*  
*NPI: 1619900313*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
 UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921  
 After Hours Phone: (858) 534-6290

*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within

1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM  
 SA 8AM-2PM

### **MOOR, TRACY, OD**

*Provider Gender: Female*  
*License Number: 35085*  
*NPI: 1184283277*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*

UCSD SHILEY EYE CENTER  
 9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921

After Hours Phone: (858) 534-6290  
*Accepting New Patients: Yes*  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

*American Sign Language (ASL): N*

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM  
 SA 8AM-2PM

### **MOOR, TRACY, OD**

*Provider Gender: Female*  
*License Number: 35085*  
*NPI: 1184283277*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*

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## J. 眼科提供者名录 - 眼科和视力服务

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B  
LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

**MORRISON REYES, JOSHUA,  
MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)

457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

**PERRY, ARTHUR, MD**

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

**PRATT, STEVEN, MD**

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

🕒 Hours: M-F 8AM-4:30PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

☐ Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010

457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

☐ Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务


restriction

American Sign Language (ASL): **VO, ANDREW MINH, OD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

**VO, ANDREW MINH, OD**

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

 Vietnamese


Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

 9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

 Phone: (858) 534-6290

Fax: (858) 732-0921

 After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-4:30PM

Provider Gender: Male

License Number: 33869

NPI: 1790291565


Provider English Spoken: Y

 Vietnamese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (858) 534-6290

Fax: (858) 732-0921

 After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

**YU, CAROL, OD**

Provider Gender: Female

License Number: 34047

NPI: 1639697451


Provider English Spoken: Y

 Spanish, Chinese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (858) 534-6290

Fax: (858) 732-0921

 After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

**YU, CAROL, OD**

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

 Spanish, Chinese


Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

 9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

 Phone: (858) 534-6290


Fax: (858) 732-0921

 After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

 *Hours: M-F 8AM-4:30PM*

### **ZAIDI, NOORINA, OD**

*Provider Gender: Female*

*License Number: 35615*

*NPI: 1023477262*


*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

 *Phone: (858) 457-3010*

*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*


 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*

### **ZHAO, TAILUN, MD**

*Provider Gender: Male*

*License Number: C186414*

*NPI: 1952659203*


*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

 *Phone: (858) 457-3010*

*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*

### **ZVANUT, DONALD, OD**

*Provider Gender: Male*

*License Number: 8642*

*NPI: 1336211804*


*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037


 *Phone: (858) 457-3010*

*Fax: (858) 457-0028*

 *After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*

### **LA MESA**


#### **AOTO, KIM, OD**

*Provider Gender: Female*

*License Number: 14524*

*NPI: 1780935650*

*Provider English Spoken: Y*

 *Spanish, Vietnamese Cultural Competency: Y*

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

☎ Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 📞 After Hours Phone: (619) 722-8460  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 🕒 Hours: M-F 8AM-5PM

### ASIS, STEPHANIE, OD

Provider Gender: Female  
 License Number: 34013  
 NPI: 1902383540  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J  
 LA MESA, CA 91942

☎ Phone: (619) 722-8460  
 Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### AVALLONE, THOMAS, MD

Provider Gender: Male

License Number: A147199

NPI: 1679865950

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551  
 LA MESA, CA 91942

☎ Phone: (619) 465-2020  
 Fax: (619) 698-1189

📞 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

### BAGHOUMIAN, MARINEH, OD

Provider Gender: Female

License Number: 14842

NPI: 1972929438

Provider English Spoken: Y

Armenian

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

☎ Phone: (619) 722-8460  
 Fax: (619) 722-8465

📞 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **BAUMANN, DANIELA, OD**

*Provider Gender: Female*

*License Number: 34530*

*NPI: 1982232146*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### **BINDER, NICHOLAS, MD**

*Provider Gender: Male*

*License Number: A124698*

*NPI: 1306076716*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8AM-5PM*

### **BUI, TINA, OD**

*Provider Gender: Female*

*License Number: 33435*

*NPI: 1497107312*

*Provider English Spoken: Y*

*Vietnamese*

*Cultural Competency: Y*

BUITIQUE OPTOMETRY

5020 BALTIMORE DR STE B

LA MESA, CA 91942

Phone: (619) 464-8303

Fax: (619) 464-4971

After Hours Phone: (619) 464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM  
SA 9AM-2PM

### **CAUCHI, CAROLINE GUERRERO, OD**

Provider Gender: Female

License Number: 6882

NPI: 1831268903

Provider English Spoken: Y

🗣️ Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

📍 8235 UNIVERSITY AVE  
LA MESA, CA 91942

📞 Phone: (619) 461-4913

Fax: (888) 509-6483

🕒 After Hours Phone: (619)  
461-4913

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-5:30PM  
W 8AM-5PM  
TH 9AM-6PM  
F 8AM-1PM

### **CHANG, TOM, MD**

Provider Gender: Male

License Number: A69909

NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

📞 Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

### **CHEW, WESLEY, OD**

Provider Gender: Male

License Number: 14901

NPI: 1952714446

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### **CHIU, STEPHAN, MD**

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

📞 Phone: (619) 465-2020

Fax: (619) 698-1189



🕒 After Hours Phone: (619)

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

465-2020  
Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM


### COCKERHAM, KIMBERLY, MD

Provider Gender: Female  
License Number: G86885  
NPI: 1366493629

Provider English Spoken: Y  
Cultural Competency: Y  
ALVARADO EYE ASSOCIATES  
MED CLINIC INC

 7877 PARKWAY DR STE 100  
LA MESA, CA 91942

 Phone: (619) 460-3711  
Fax: (619) 460-2184

 After Hours Phone: (619)  
460-3711

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F  
8:30AM-4:30PM

### CONRAD, RANDALL, OD

Provider Gender: Male

License Number: 6423


NPI: 1962617464


Provider English Spoken: Y

Spanish  
Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

 7877 PARKWAY DR STE 100  
LA MESA, CA 91942

 Phone: (619) 460-3711  
Fax: (619) 460-2184

 After Hours Phone: (619)  
460-3711

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F  
8:30AM-4:30PM

### DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955


NPI: 1265927578

Provider English Spoken: Y  
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

 Phone: (619) 722-8460  
Fax: (619) 722-8465

 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955






NPI: 1265927578

Provider English Spoken: Y  
Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 5565 GROSSMONT  
 CENTER DR # 551  
 LA MESA, CA 91942  
 Phone: (619) 465-2020  
 Fax: (619) 698-1189  
 After Hours Phone: (619)  
 465-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM



### **DYER, SHARON, OD**

Provider Gender: Female  
 License Number: 33450  
 NPI: 1063866887  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 EYE ASSOCIATES OF SAN  
 DIEGO/ACUITY EYE GROUP  
 5565 GROSSMONT  
 CENTER DR # 551  
 LA MESA, CA 91942  
 Phone: (619) 465-2020  
 Fax: (619) 698-1189  
 After Hours Phone: (619)  
 465-2020  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM




### **DYER, SHARON, OD**

Provider Gender: Female  
 License Number: 33450  
 NPI: 1063866887  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 7339 EL CAJON BLVD STE  
 J  
 LA MESA, CA 91942  
 Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 After Hours Phone: (619)  
 722-8460  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **GOLLOGLY, HEIDRUN, MD**



Provider Gender: Female  
 License Number: A134761  
 NPI: 1477879823  
 Provider English Spoken: Y  
 German, French, Spanish  
 Cultural Competency: Y  
 ACUITY EYE GROUP

 7339 EL CAJON BLVD STE  
 J  
 LA MESA, CA 91942  
 Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 After Hours Phone: (619)  
 722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

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 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

### **GOLLOGLY, HEIDRUN, MD**

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

German, French, Spanish  
Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020  
Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### **GRAY, IGA, MD**

Provider Gender: Female

License Number: A174875

NPI: 1033538350

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

7877 PARKWAY DR STE 100  
LA MESA, CA 91942

Phone: (619) 460-3711  
Fax: (619) 460-2184

After Hours Phone: (619)  
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F  
8:30AM-4:30PM

### **HAIGHT, BRUCE, MD**

Provider Gender: Male

License Number: G41117

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J  
LA MESA, CA 91942

Phone: (619) 722-8460  
Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **HAIGHT, BRUCE, MD**

Provider Gender: Male

License Number: G41117

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020  
Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction



American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

N


 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1U  
 **Hours: M-F 8AM-5PM**

### **HAMOUIE, JUDY, OD**

Provider Gender: Female  
License Number: 34984  
NPI: 1518638287  
Provider English Spoken: Y  
Cultural Competency: Y

ACUITY EYE GROUP


 7339 EL CAJON BLVD STE J

LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

### **HAN, SULKI, OD**

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y


 Korean

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

### **HIXSON, THOMAS, OD**

Provider Gender: Male

License Number: 7490


NPI: 1528072683

Provider English Spoken: Y

Cultural Competency: Y


LA MESA VISION CARE

 8007 LA MESA BLVD  
LA MESA, CA 91942

 Phone: (619) 466-5665  
Fax: (619) 466-5688

 After Hours Phone: (619) 466-5665


Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1U

 **Hours: M 8AM-4PM**

**TU 9AM-6PM**

**W 8AM-4PM**

**TH 9AM-6PM**

**F 9AM-5PM**

**SA 8AM-1PM**

### **HSU, CHRISTOPHER, MD**

Provider Gender: Male

License Number: A65973

NPI: 1336167618


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

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## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### HUNG, JANICE, OD

Provider Gender: Female

License Number: 34296

NPI: 1750917936

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

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## J. 眼科提供者名录 - 眼科和视力服务

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942  
Phone: (619) 722-8460  
Fax: (619) 722-8465  
After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020  
Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### KATZMAN, LEE, MD

Provider Gender: Male

License Number: A135673

NPI: 1912297284

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

7877 PARKWAY DR STE 100  
LA MESA, CA 91942

Phone: (619) 460-3711  
Fax: (619) 460-2184

After Hours Phone: (619) 460-3711

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F  
8:30AM-4:30PM

### KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460  
Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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## J. 眼科提供者名录 - 眼科和视力服务

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT  
CENTER DR # 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT  
CENTER DR # 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

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## J. 眼科提供者名录 - 眼科和视力服务


restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y


Spanish, Chinese

Cultural Competency: Y

SAN DIEGO EYE

PROFESSIONALS

 8291 LA MESA BLVD  
LA MESA, CA 91942

 Phone: (619) 583-4295

Fax: (619) 393-1133

 After Hours Phone: (619)  
583-4295

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
German, Spanish, Chinese

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: TU-F 9AM-5PM  
SA 9AM-5PM

### LEVY, PHILLIP, OD

Provider Gender: Male

License Number: 4884

NPI: 1528189115


Provider English Spoken: Y

Cultural Competency: Y

BUITIQUE OPTOMETRY

 5020 BALTIMORE DR STE  
B

LA MESA, CA 91942

 Phone: (619) 464-8303

Fax: (619) 464-4971

 After Hours Phone: (619)  
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM  
SA 9AM-2PM

### MANNEN, JOSEPH, OD

Provider Gender: Male

License Number: 33650


NPI: 1851827034

Provider English Spoken: Y


Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

 7877 PARKWAY DR STE 100  
LA MESA, CA 91942

 Phone: (619) 460-3711

Fax: (619) 460-2184

 After Hours Phone: (619)  
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F  
8:30AM-4:30PM

### MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)


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## J. 眼科提供者名录 - 眼科和视力服务

722-8460  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **MARR, RYAN, OD**


Provider Gender: Male  
 License Number: 35302  
 NPI: 1235857525  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP  
 5565 GROSSMONT CENTER DR # 551  
 LA MESA, CA 91942  
 Phone: (619) 465-2020  
 Fax: (619) 698-1189  
 After Hours Phone: (619) 465-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender

restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM


### **MCGRAW, JOSEPH, MD**

Provider Gender: Male  
 License Number: A155228  
 NPI: 1588624852  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP  
 5565 GROSSMONT CENTER DR # 551  
 LA MESA, CA 91942  
 Phone: (619) 465-2020  
 Fax: (619) 698-1189  
 After Hours Phone: (619) 465-2020


Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### **MCGRAW, JOSEPH, MD**

Provider Gender: Male  
 License Number: A155228  
 NPI: 1588624852  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 7339 EL CAJON BLVD STE J  
 LA MESA, CA 91942  
 Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **MERALI, MURTAZA, OD**

Provider Gender: Female  
 License Number: 14558  
 NPI: 1972944189  
 Provider English Spoken: Y  
 Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

**MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

**MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

**NGUYEN, THY, OD**

Provider Gender: Female

License Number: 12746

NPI: 1750490413

Provider English Spoken: Y

Spanish, Vietnamese Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish



Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**

### **OU, JOCELYN, OD**



Provider Gender: Female  
License Number: 34063  
NPI: 1225518996  
Provider English Spoken: Y  
Cultural Competency: Y  
ALVARADO EYE ASSOCIATES  
MED CLINIC INC  
 7877 PARKWAY DR STE 100  
LA MESA, CA 91942  
 Phone: (619) 460-3711  
Fax: (619) 460-2184  
 After Hours Phone: (619) 460-3711  
Accepting New Patients: Yes  
 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1U  
 **Hours: M-F 8:30AM-4:30PM**


### **PANDYA, BHUMIKA, OD**






Provider Gender: Female  
License Number: 35025

NPI: 1063182822  
Provider English Spoken: Y  
 Hindi  
Cultural Competency: Y  
ACUITY EYE GROUP  
 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460  
Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**

### **PATEL, GITANE, MD**

Provider Gender: Male  
License Number: A108603  
NPI: 1710171434  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

 Phone: (619) 722-8460  
Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460  
Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**

### **PATEL, SARJAN, MD**

Provider Gender: Male  
License Number: A114976  
NPI: 1316199326  
Provider English Spoken: Y  
 Gujarati, Hindi, Spanish  
Cultural Competency: Y  
ACUITY EYE GROUP  
 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460  
Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## J. 眼科提供者名录 - 眼科和视力服务

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### PETERS, JAMIE, OD

Provider Gender: Female

License Number: 10724

NPI: 1073691077

Provider English Spoken: Y


Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

 8235 UNIVERSITY AVE  
LA MESA, CA 91942

 Phone: (619) 461-4913

Fax: (888) 509-6483

 After Hours Phone: (619)  
461-4913

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 9AM-5:30PM  
W 8AM-5PM  
TH 9AM-6PM  
F 8AM-1PM

### PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y


Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552


Provider English Spoken: Y

Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### QUACH, PHUC, OD

Provider Gender: Male

License Number: 12891

NPI: 1770617805

Provider English Spoken: Y

Spanish, Vietnamese

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## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

**ACUITY EYE GROUP**

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

**SAMUEL, MICHAEL, MD**

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y


Cultural Competency: Y

EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942


 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

**SCOTT, JEFFREY, OD**

Provider Gender: Male

License Number: 34978

NPI: 1568813434


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender


restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

**TILLMAN, SYLVIA, OD**

Provider Gender: Female

License Number: 9726

NPI: 1174730824


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

### EYE ASSOCIATES OF SAN

### DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

### ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### TRAN, HENRY, OD

Provider Gender: Male

License Number: 15159

NPI: 1467846709

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None



Gender Restriction: No Gender restriction

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务




N

 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**

### TSUI, NANCY, OD

Provider Gender: Female  
License Number: 33944  
NPI: 1841785037  
Provider English Spoken: Y  
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460



Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):

N




 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**

### TU, BEVERLY, OD

Provider Gender: Female  
License Number: 34108  
NPI: 1053892794  
Provider English Spoken: Y

Spanish, Vietnamese  
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**



Public transportation (within 1/2 mile from Site): 1T

 **Hours: M-F 8AM-5PM**

### VINH, JOHN, OD

Provider Gender: Male  
License Number: 14177  
NPI: 1003102724  
Provider English Spoken: Y  
Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460



Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):



N

 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**

### VINH, JOHN, OD

Provider Gender: Male  
License Number: 14177  
NPI: 1003102724

Provider English Spoken: Y  
Cultural Competency: Y  
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942  
 Phone: (619) 465-2020  
Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

### VIVIRITO, MARY, OD

Provider Gender: Female  
 License Number: 33798  
 NPI: 1477968667  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551  
 LA MESA, CA 91942  
 Phone: (619) 465-2020  
 Fax: (619) 698-1189  
 After Hours Phone: (619) 465-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

### VIVIRITO, MARY, OD

Provider Gender: Female  
 License Number: 33798  
 NPI: 1477968667  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
 LA MESA, CA 91942  
 Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### WONG, SHARON, OD

Provider Gender: Female  
 License Number: 15137  
 NPI: 1497159552  
 Provider English Spoken: Y

Spanish  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 7339 EL CAJON BLVD STE J  
 LA MESA, CA 91942  
 Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### YOUNG, ALLA, OD

Provider Gender: Female  
 License Number: 34191  
 NPI: 1285085142  
 Provider English Spoken: Y  
 Russian

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

📍 7877 PARKWAY DR STE 100  
LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

🕒 After Hours Phone: (619)  
460-3711

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1U*

🕒 *Hours: M-F  
8:30AM-4:30PM*

### **ZAIDI, NOORINA, OD**

*Provider Gender: Female*

*License Number: 35615*

*NPI: 1023477262*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619)  
722-8460

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken:  
Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1T*

🕒 *Hours: M-F 8AM-5PM*

### **ZAIDI, NOORINA, OD**

*Provider Gender: Female*

*License Number: 35615*

*NPI: 1023477262*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT  
CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619)  
465-2020

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken:  
Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1U*

🕒 *Hours: M-F 8AM-5PM*

### **ZVANUT, DONALD, OD**

*Provider Gender: Male*

*License Number: 8642*

*NPI: 1336211804*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT  
CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619)  
465-2020

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken:  
Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT  
PROVIDER*

*Public transportation (within  
1/2 mile from Site): 1U*

🕒 *Hours: M-F 8AM-5PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### LAKESIDE

### FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

### JOHN C FLEMING OD

9710 WINTER GARDENS BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-TH 9AM-5PM  
F 9AM-4PM

### HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

### JOHN C FLEMING OD

9710 WINTER GARDENS BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-TH 9AM-5PM  
F 9AM-4PM

### JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100

NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

### JOHN C FLEMING OD

9710 WINTER GARDENS BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1U

🕒 Hours: M-TH 9AM-5PM  
F 9AM-4PM

### NATIONAL CITY

#### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

🗳 Site English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

📞 Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

#### BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

📞 Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

🗳 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction



American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务






N

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-4:30PM*



### **DEAN, MOENA, OD**

*Provider Gender: Female*  
*License Number: 33955*  
*NPI: 1265927578*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*





### **ACUITY EYE GROUP**

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950  
 *Phone: (619) 472-1010*  
*Fax: (619) 479-5233*  
 *After Hours Phone: (619) 472-1010*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Language(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL):*



N

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-TU 8AM-6PM*  
*W 8:30AM-5PM*  
*TH 8AM-6PM*  
*F 8AM-5PM*


### **DEAN, MOENA, OD**

*Provider Gender: Female*  
*License Number: 33955*  
*NPI: 1265927578*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**WEST COAST EYE CARE**  
 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950  
 *Phone: (619) 470-2700*  
*Fax: (619) 267-8221*  
 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*




*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-4:30PM*



### **DYER, SHARON, OD**

*Provider Gender: Female*  
*License Number: 33450*  
*NPI: 1063866887*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**WEST COAST EYE CARE**  
 2240 E PLAZA BLVD STE FG






NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*  
*Fax: (619) 267-8221*  
 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-4:30PM*


### **DYER, SHARON, OD**

*Provider Gender: Female*  
*License Number: 33450*  
*NPI: 1063866887*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950  
 *Phone: (619) 472-1010*  
*Fax: (619) 479-5233*  
 *After Hours Phone: (619) 472-1010*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Language(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

restriction

American Sign Language (ASL):  Hours: M-TU 8AM-6PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### FISH, STEVEN, MD

Provider Gender: Male

License Number: A164497


NPI: 1760877120

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL): 1/2 mile from Site): 1T

N

 Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

### GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823


Provider English Spoken: Y

 German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

### HAIGHT, BRUCE, MD

Provider Gender: Male

License Number: G41117


NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

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## J. 眼科提供者名录 - 眼科和视力服务

### ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### HUNG, JANICE, OD

Provider Gender: Female

License Number: 34296

NPI: 1750917936

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)

470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **KALRA, ANKUR, OD**

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Hindi

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)  
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM

### **KATZMAN, BARRY, MD**

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### **KEDDINGTON, JOAN, OD**

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)

477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

restriction

American Sign Language (ASL):  Hours: M-F 8AM-4:30PM

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137


NPI: 1275263584


Provider English Spoken: Y

 Arabic

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

### **KHIEU, TINA, OD**

Provider Gender: Female


License Number: 34777


NPI: 1962031617

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777


NPI: 1962031617

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### **KING, MARY, OD**

Provider Gender: Female

License Number: 13711

NPI: 1578792107


Provider English Spoken: Y


 Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950

 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

477-2159  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Arabic, Hindi, Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: SU 10AM-4PM  
 M-F 9AM-6PM  
 SA 9AM-5PM

### LEE, AUSTIN, OD

Provider Gender: Male  
 License Number: 14519  
 NPI: 1922356914  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 VIVE OPTOMETRY  
 1033 HIGHLAND AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 477-2771  
 Fax: (619) 477-1680  
 After Hours Phone: (619) 477-2771  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender

restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: TU 10AM-5PM  
 W-F 9:30AM-5PM

### LEE, SALLY, DO

Provider Gender: Female  
 License Number: 20A8088  
 NPI: 1457468514  
 Provider English Spoken: Y  
 Spanish, Chinese  
 Cultural Competency: Y

### SAN DIEGO EYE

#### PROFESSIONALS

2345 E 8TH ST STE 111  
 NATIONAL CITY, CA 91950  
 Phone: (619) 583-4295  
 Fax: (619) 825-7300  
 After Hours Phone: (619) 583-4295  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within

1/2 mile from Site): 1T  
 Hours: TH-F 9AM-5PM

### MARLAY, GREG, OD

Provider Gender: Male  
 License Number: 6998  
 NPI: 1306903083  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 MARLAY ENTERPRISES

1132 E PLAZA BLVD STE 201  
 NATIONAL CITY, CA 91950  
 Phone: (619) 477-4166  
 After Hours Phone: (619) 477-4166

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM  
 W 10AM-6PM  
 F 10AM-6PM  
 SA 10AM-2PM

### MARR, RYAN, OD

Provider Gender: Male  
 License Number: 35302  
 NPI: 1235857525

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **MENDOZA, RAYMUNDO, OD**

Provider Gender: Male

License Number: 8150

NPI: 1306837760

Provider English Spoken: Y

Spanish

Cultural Competency: Y

NATIONAL CITY EYECARE

2403 E PLAZA BLVD  
NATIONAL CITY, CA 91950

Phone: (619) 475-2184

Fax: (619) 475-3917

After Hours Phone: (619)  
475-2184

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-TU 10AM-5PM  
TH-F 10AM-5PM

### **MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### **MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE

FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### **NGUYEN, THERESA, OD**

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)  
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Hindi, Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM


### **PATEL, SARJAN, MD**

Provider Gender: Male


License Number: A114976


NPI: 1316199326

Provider English Spoken: Y


 Gujarati, Hindi, Spanish  
Cultural Competency: Y

WEST COAST EYE CARE


 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700


Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### **PATEL, GITANE, MD**

Provider Gender: Male


License Number: A108603


NPI: 1710171434

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE


 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### **PRABHU, SUJATA, MD**

Provider Gender: Female

License Number: A115965


NPI: 1982872552


Provider English Spoken: Y

 Spanish

Cultural Competency: Y

WEST COAST EYE CARE


 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### **SCOTT, JEFFREY, OD**

Provider Gender: Male

License Number: 34978


NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700


Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务


 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### TON-NU, MY LINH, OD

Provider Gender: Female


License Number: 34990


NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700


Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y


 Arabic

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950


 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619) 477-2159

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 Phone: (619) 472-1010  
Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700  
Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798


NPI: 1477968667


Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700  
Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667


Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010  
Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### WU, EVA, OD

Provider Gender: Female

License Number: 14743

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## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1073954442

Provider English Spoken: Y

Spanish, Chinese

Cultural Competency: Y

VIVE OPTOMETRY

1033 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (619) 477-2771

Fax: (619) 477-1680

After Hours Phone: (619)  
477-2771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: TU 10AM-5PM  
W-F 9:30AM-5PM

### **ZAIDI, NOORINA, OD**

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### **ZAIDI, NOORINA, OD**

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### **ZVANUT, DONALD, OD**

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### OCEANSIDE

#### KASAI, SARAH, OD

Provider Gender: Female

License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2  
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)  
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM  
W 10AM-7PM  
TH 9AM-6PM  
F 9AM-5PM

#### NISKANEN, RACHEL, OD

Provider Gender: Female

License Number: 34663

NPI: 1467065797

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2  
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)  
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM  
W 10AM-7PM  
TH 9AM-6PM  
F 9AM-5PM

#### ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2

OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)  
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM  
W 10AM-7PM  
TH 9AM-6PM  
F 9AM-5PM

### RAMONA

#### HOMESLEY, SUSAN, OD

Provider Gender: Female

License Number: 6693

NPI: 1720068984

Provider English Spoken: Y

Spanish

Cultural Competency: Y

SUSAN D HOMESLEY OD

1516 MAIN ST STE 102  
RAMONA, CA 92065

Phone: (760) 789-0950

Fax: (760) 789-6057

After Hours Phone: (760)  
789-0950

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM  
 SA 8AM-11AM

### SAN DIEGO

#### ACKROYD, ARCHIE, OD

Provider Gender: Male

License Number: 4774

NPI: 1629107172

Provider English Spoken: Y

Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

7246 CLAIREMONT MESA BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): **AOTO, KIM, OD**

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM  
 TU-TH 9AM-6PM  
 F 8AM-5PM

#### ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
 SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese  
 Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

#### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)  
487-7900

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM  
SA 8:30AM-2PM

### BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Spanish  
Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y  
Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

### **BAUMANN, DANIELA, OD**


*Provider Gender: Female*  
*License Number: 34530*  
*NPI: 1982232146*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*

### **WEST COAST EYE CARE**

 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 *Phone: (619) 697-4600*  
*Fax: (619) 697-2410*


 *After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*


 *Hours: M 7:30AM-4:30PM*  
*TU 8AM-5PM*  
*W 8:30AM-5PM*  
*TH 8AM-6PM*  
*F 8AM-4PM*


### **BEAUDRY, AMANDA, OD**

*Provider Gender: Female*  
*License Number: 33385*  
*NPI: 1477903516*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
RADY CHILDRENS


### **SPECIALISTS**

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

 *Phone: (858) 309-7702*  
*Fax: (858) 966-8901*

 *After Hours Phone: (858) 309-7702*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 7AM-5PM*

### **BERGMARK, JAMIE, OD**

*Provider Gender: Female*  
*License Number: 33657*  
*NPI: 1669920757*


*Provider English Spoken: Y*


*Cultural Competency: Y*

RADY CHILDRENS


### **SPECIALISTS**

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

 *Phone: (858) 309-7702*  
*Fax: (858) 966-8901*

 *After Hours Phone: (858) 309-7702*

*Accepting New Patients: Yes*


 *Site English Spoken: Y*  
*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 7AM-5PM*

### **BHATIA, SHAGUN, MD**

*Provider Gender: Female*  
*License Number: A154902*  
*NPI: 1104237353*


*Provider English Spoken: Y*

*Cultural Competency: Y*

RADY CHILDRENS


### **SPECIALISTS**

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

 *Phone: (858) 309-7702*  
*Fax: (858) 966-8901*

 *After Hours Phone: (858) 309-7702*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*






 *Hours: M-F 7AM-5PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## J. 眼科提供者名录 - 眼科和视力服务

### **BINDER, NICHOLAS, MD**

Provider Gender: Male  
 License Number: A124698  
 NPI: 1306076716  
 Provider English Spoken: Y  
 Cultural Competency: Y  
**WEST COAST EYE CARE**  
 4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111  
 Phone: (858) 565-8822  
 Fax: (858) 565-2449  
 After Hours Phone: (858)  
 565-8822  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M 10AM-6PM  
 TU 8:30AM-5PM  
 W 7:30AM-4PM  
 TH 9:30AM-5PM  
 F 8AM-4PM

### **BINDER, NICHOLAS, MD**



Provider Gender: Male  
 License Number: A124698  
 NPI: 1306076716  
 Provider English Spoken: Y  
 Cultural Competency: Y  
**WEST COAST EYE CARE**

 6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115  
 Phone: (619) 697-4600  
 Fax: (619) 697-2410  
 After Hours Phone: (619)  
 697-4600  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M 7:30AM-4:30PM  
 TU 8AM-5PM  
 W 8:30AM-5PM  
 TH 8AM-6PM  
 F 8AM-4PM

### **BOECK, CARL, OD**

Provider Gender: Male  
 License Number: 6620  
 NPI: 1588656151  
 Provider English Spoken: Y  
 German, Spanish  
 Cultural Competency: Y  
**VAN HOOSE OPTOMETRIC  
 CORPORATION**  
 7246 CLAIREMONT MESA  
 BLVD  
 SAN DIEGO, CA 92111  
 Phone: (858) 292-7193  
 Fax: (858) 292-8247  
 After Hours Phone: (858)

292-7193

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1T  
 Hours: M 8AM-5PM  
 TU-TH 9AM-6PM  
 F 8AM-5PM

### **CAO, STEPHANIE, OD**

Provider Gender: Female  
 License Number: 35158  
 NPI: 1215660436  
 Provider English Spoken: Y  
 Cultural Competency: Y  
**OPTOM-EYES VISION CARE  
 OPTOMETRY**  
 5638 MISSION CENTER RD  
 STE 103  
 SAN DIEGO, CA 92108  
 Phone: (619) 295-2900  
 Fax: (888) 210-5799  
 After Hours Phone: (619)  
 295-2900  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish  
 Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
 N

🗺️ Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 🕒 Hours: M-F 9AM-5:30PM  
 SA 9AM-3PM

### CAO, STEPHANIE, OD

Provider Gender: Female  
 License Number: 35158  
 NPI: 1215660436  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 FASHION VALLEY EYE CARE OPTOMETR  
 🗺️ 7007 FRIARS RD STE 351  
 SAN DIEGO, CA 92108  
 📞 Phone: (619) 291-2020  
 Fax: (888) 210-5799  
 📞 After Hours Phone: (619) 291-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL):  
 N  
 🗺️ Accessibility: CONTACT PROVIDER  
 Public transportation (within

1/2 mile from Site): 1T  
 🕒 Hours: M-F 10AM-7PM  
 SA 10AM-7PM

### CAO, STEPHANIE, OD

Provider Gender: Female  
 License Number: 35158  
 NPI: 1215660436  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 OPTOM-EYES VISION CARE OPTOMETRY  
 🗺️ 1555 PALM AVE STE A2  
 SAN DIEGO, CA 92154  
 📞 Phone: (619) 297-2020  
 Fax: (888) 210-5799  
 📞 After Hours Phone: (619) 297-2020  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
 N  
 🗺️ Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 🕒 Hours: M-F 9:30AM-6PM  
 SA 9AM-3PM

### CHAIN, PEI CHI, OD

Provider Gender: Female  
 License Number: 34439  
 NPI: 1730676727  
 Provider English Spoken: Y

Spanish, Chinese  
 Cultural Competency: Y  
 SPOTLIGHT OPTOMETRY  
 🗺️ 7835 HIGHLANDS VLG PL  
 D 106  
 SAN DIEGO, CA 92129  
 📞 Phone: (858) 250-0052  
 Fax: (858) 788-0287  
 📞 After Hours Phone: (858) 250-0052  
 Accepting New Patients: Yes


Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
 N  
 🗺️ Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 🕒 Hours: M-TU 9AM-5PM  
 W 10AM-6PM  
 F 9AM-5PM  
 SA 9AM-1PM

### CHEN, LESLIE, OD

Provider Gender: Female  
 License Number: 12792  
 NPI: 1508953332  
 Provider English Spoken: Y  
 Chinese  
 Cultural Competency: Y  
 EYE STUDIO OPTOMETRY  
 🗺️ 4475 UNIVERSITY AVE  
 SAN DIEGO, CA 92105

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 Phone: (619) 521-2020  
Fax: (619) 521-2025

 After Hours Phone: (619) 521-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-W 9AM-5PM  
TH 9AM-1:30PM  
F 9AM-5PM  
SA 9AM-1PM

### **COLEMAN, BROOKE, OD**

Provider Gender: Female

License Number: 13551

NPI: 1700040748


Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

 16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

 Phone: (858) 487-7900

Fax: (858) 487-1896

 After Hours Phone: (858) 487-7900

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM  
SA 8:30AM-2PM

### **COOPER, MICHAEL, OD**

Provider Gender: Male

License Number: 10476

NPI: 1164586244


Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

 16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

 Phone: (858) 487-7900

Fax: (858) 487-1896

 After Hours Phone: (858) 487-7900

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM  
SA 8:30AM-2PM

### **DAVIS, JADE, OD**

Provider Gender: Female


License Number: 11765


NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE  
OPTOMETR

 7007 FRIARS RD STE 351  
SAN DIEGO, CA 92108

 Phone: (619) 291-2020

Fax: (888) 210-5799

 After Hours Phone: (619) 291-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 10AM-7PM  
SA 10AM-7PM

### **DAVIS, JADE, OD**

Provider Gender: Female

License Number: 11765

NPI: 1457303398

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y  
Cultural Competency: Y  
OPTOM-EYES VISION CARE  
OPTOMETRY

📍 5638 MISSION CENTER RD  
STE 103  
SAN DIEGO, CA 92108

☎ Phone: (619) 295-2900

Fax: (888) 210-5799

🕒 After Hours Phone: (619)  
295-2900

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM  
SA 9AM-3PM

### DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### DUONG, KIM, OD

Provider Gender: Female

License Number: 34222

NPI: 1114448651

Provider English Spoken: Y

☐ Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 7AM-5PM

### DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

☎ Phone: (858) 487-7900

Fax: (858) 487-1896

🕒 After Hours Phone: (858)  
487-7900

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

SA 8:30AM-2PM

### DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

### DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM

TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

### GIANG, STEVEN, OD

Provider Gender: Male

License Number: 34489

NPI: 1730710104

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300  
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)

284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM  
SA 9AM-1PM

### HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
















Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):



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## J. 眼科提供者名录 - 眼科和视力服务





- N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-4PM
- HO, AMIEE, OD**  
 Provider Gender: Female  
 License Number: 14527  
 NPI: 1396009478  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 UC SAN DIEGO HEALTH  
 16950 VIA TAZON  
 SAN DIEGO, CA 92127  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921  
 After Hours Phone: (858) 534-6290  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM
- HO, HOANG, OD**  
 Provider Gender: Male  
 License Number: 12582  
 NPI: 1275684847
- Provider English Spoken: Y  
 Cultural Competency: Y  
 HEALTHY I CARE OPTOMETRY  
 10737 CAMINO RUIZ STE 220  
 SAN DIEGO, CA 92126  
 Phone: (619) 590-1994  
 After Hours Phone: (619) 590-1994  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: TH-F 9AM-5PM
- HOANG, KEVIN, OD**  
 Provider Gender: Male  
 License Number: 34401  
 NPI: 1790339216  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 JASMINE P NGUYEN OD INC  
 4029 43RD ST STE 300  
 SAN DIEGO, CA 92105  
 Phone: (619) 284-3937  
 Fax: (619) 284-3938  
 After Hours Phone: (619) 284-3937  
 Accepting New Patients: Yes
- Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Vietnamese  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
 N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 9AM-5PM SA 9AM-1PM*

### **HOM, GREGORY, OD**


*Provider Gender: Male*  
*License Number: 9694*  
*NPI: 1154473916*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**GREGORY G HOM OD**  
 11230 SORRENTO VLY RD STE 145  
 SAN DIEGO, CA 92121  
 *Phone: (858) 535-9835*  
*Fax: (858) 535-1266*  
 *After Hours Phone: (858) 535-9835*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*


*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-TH 9AM-5PM F 9AM-4PM*

### **HOO, PAMELA, OD**



*Provider Gender: Female*

*License Number: 11033*  
*NPI: 1275566010*  
*Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: Y*  
**HILLCREST EYE CENTER-UCSD**

 4060 4TH AVE STE 610  
 SAN DIEGO, CA 92103  
 *Phone: (619) 543-6244*  
*Fax: (619) 295-5034*



 *After Hours Phone: (619) 543-6244*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*



*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-4PM*


### **HUDSON, HENRY, MD**



*Provider Gender: Male*  
*License Number: G76091*  
*NPI: 1851349195*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**WEST COAST EYE CARE**  
 6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115  
 *Phone: (619) 697-4600*  
*Fax: (619) 697-2410*



 *After Hours Phone: (619) 697-4600*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM*

### **HUSTANA, LARA, OD**


*Provider Gender: Female*  
*License Number: 11472*  
*NPI: 1235161597*  
*Provider English Spoken: Y*  
 *French*  
*Cultural Competency: Y*  
**HILLCREST EYE CENTER-UCSD**

 4060 4TH AVE STE 610  
 SAN DIEGO, CA 92103  
 *Phone: (619) 543-6244*  
*Fax: (619) 295-5034*

 *After Hours Phone: (619) 543-6244*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

Gender Restriction: No Gender restriction  Hours: M-F 8AM-5PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-4PM

### HUYNH, PAUL, MD

Provider Gender: Male

License Number: A79141

NPI: 1871577056

Provider English Spoken: Y


 Vietnamese

Cultural Competency: Y

ADVANCED EYE AND LASER CTR OF CA INC

 4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105

 Phone: (619) 283-1303

Fax: (619) 283-1666

 After Hours Phone: (619) 283-1303

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

### HUYNH, PAUL, MD

Provider Gender: Male

License Number: A79141

NPI: 1871577056

Provider English Spoken: Y


 Vietnamese

Cultural Competency: Y

ADVANCED EYE AND LASER CTR OF CA INC

 10737 CAMINO RUIZ STE 100

SAN DIEGO, CA 92126


 Phone: (858) 549-3200

Fax: (858) 549-3207

 After Hours Phone: (858) 549-3200

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### HUYNH, CHI, OD

Provider Gender: Female

License Number: 12901

NPI: 1922187426

Provider English Spoken: Y

 Vietnamese


Cultural Competency: Y

CRYSTAL EYESITE

OPTOMETRY

 9225 MIRA MESA BLVD STE 108

SAN DIEGO, CA 92126

 Phone: (858) 547-3988

Fax: (844) 367-5161

 After Hours Phone: (858) 547-3988

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:30AM-6PM  
W 9:30AM-6PM

TH-F 10AM-6PM

SA 9AM-3PM

### HUYNH, LOAN, OD

Provider Gender: Female

License Number: 34472

NPI: 1003454604

Provider English Spoken: Y

 Vietnamese








Cultural Competency: Y




NORTH COUNTY OPTOMETRY





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## J. 眼科提供者名录 - 眼科和视力服务


 11835 CARMEL MTN RD  
 STE 1313  
 SAN DIEGO, CA 92128  
 Phone: (858) 674-1276  
 Fax: (858) 674-5863  
 After Hours Phone: (858)  
 674-1276  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Language(s) Spoken:  
 Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1T  
 Hours: M 9AM-4PM  
 TU 7AM-1PM  
 W-TH 10AM-6PM  
 F 10AM-3PM  
 SA 9AM-2PM





**KALBAKJI, NATALY, OD**  
 Provider Gender: Female  
 License Number: 34943  
 NPI: 1700556438  
 Provider English Spoken: Y  
 Arabic  
 Cultural Competency: Y  
 WEST COAST EYE CARE  
 4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111  
 Phone: (858) 565-8822  
 Fax: (858) 565-2449

 After Hours Phone: (858)  
 565-8822  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M 10AM-6PM  
 TU 8:30AM-5PM  
 W 7:30AM-4PM  
 TH 9:30AM-5PM  
 F 8AM-4PM

**KALBAKJI, NATALY, OD**  
 Provider Gender: Female  
 License Number: 34943  
 NPI: 1700556438  
 Provider English Spoken: Y  
 Arabic  
 Cultural Competency: Y  
 WEST COAST EYE CARE  
 6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115  
 Phone: (619) 697-4600  
 Fax: (619) 697-2410  
 After Hours Phone: (619)  
 697-4600  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender

restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M 7:30AM-4:30PM  
 TU 8AM-5PM  
 W 8:30AM-5PM  
 TH 8AM-6PM  
 F 8AM-4PM

**KATZMAN, BARRY, MD**  
 Provider Gender: Male  
 License Number: A34834  
 NPI: 1760473797  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 WEST COAST EYE CARE

 6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115  
 Phone: (619) 697-4600  
 Fax: (619) 697-2410  
 After Hours Phone: (619)  
 697-4600  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### **KATZMAN, BARRY, MD**

Provider Gender: Male  
License Number: A34834  
NPI: 1760473797  
Provider English Spoken: Y  
 Spanish  
Cultural Competency: Y

### **WEST COAST EYE CARE**

📍 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111  
📞 Phone: (858) 565-8822  
Fax: (858) 565-2449  
🕒 After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes  
 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### **KHALIGHI, PAYMAN, OD**

Provider Gender: Male  
License Number: 13014  
NPI: 1396897880  
Provider English Spoken: Y  
 Spanish

Cultural Competency: Y

### **JASMINE P NGUYEN OD INC**

📍 4029 43RD ST STE 300  
SAN DIEGO, CA 92105  
📞 Phone: (619) 284-3937  
Fax: (619) 284-3938  
🕒 After Hours Phone: (619)  
284-3937

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish, Vietnamese  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM  
SA 9AM-1PM

### **KHALIL, VADY, OD**

Provider Gender: Male  
License Number: 35137  
NPI: 1275263584  
Provider English Spoken: Y  
 Arabic  
Cultural Competency: Y

### **WEST COAST EYE CARE**

📍 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
📞 Phone: (619) 697-4600  
Fax: (619) 697-2410

🕒 After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### **KHALIL, VADY, OD**

Provider Gender: Male  
License Number: 35137  
NPI: 1275263584  
Provider English Spoken: Y  
 Arabic

Cultural Competency: Y

### **WEST COAST EYE CARE**

📍 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111  
📞 Phone: (858) 565-8822  
Fax: (858) 565-2449

🕒 After Hours Phone: (858)  
565-8822

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M 10AM-6PM  
 TU 8:30AM-5PM  
 W 7:30AM-4PM  
 TH 9:30AM-5PM  
 F 8AM-4PM

### **KHAN, FAHAD, MD**

Provider Gender: Male  
 License Number: A163142  
 NPI: 1548605843

Provider English Spoken: Y

Hindi  
 Cultural Competency: Y

VISION SPECIALISTS OF CALIFORNIA

233 LEWIS ST  
 SAN DIEGO, CA 92103

Phone: (619) 501-9050  
 Fax: (619) 501-9054

After Hours Phone: (619) 501-9050

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Language(s) Spoken: Bengali, Hindi, Spanish  
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T

Hours: M-TH 8AM-5PM  
 F 8AM-4PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115

Phone: (619) 697-4600  
 Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
 TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111

Phone: (858) 565-8822  
 Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM  
 TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

### **KHINDA, SUNEHA, OD**

Provider Gender: Female

License Number: 35494

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)  
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM  
SA 8:30AM-2PM

### KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT

PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

HILLCREST EYE  
CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244  
Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782

Provider English Spoken: Y

Spanish

Cultural Competency: Y

UPTOWN OPTOMETRY

4096 PARK BLVD  
SAN DIEGO, CA 92103

Phone: (619) 291-5505  
Fax: (619) 291-4404

After Hours Phone: (619)  
291-5505

Accepting New Patients: Yes

Site English Spoken: Y N

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: TU-F 9AM-3PM  
SA 10AM-2PM

### LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE  
OPTOMETR

7007 FRIARS RD STE 351  
SAN DIEGO, CA 92108

Phone: (619) 291-2020  
Fax: (888) 210-5799

After Hours Phone: (619)  
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 10AM-7PM  
SA 10AM-7PM

### LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE  
OPTOMETRY

5638 MISSION CENTER RD  
STE 103

SAN DIEGO, CA 92108  
Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)  
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

SA 9AM-3PM

### LAU, JANICE, OD

Provider Gender: Female

License Number: 13037

NPI: 1952453300

Provider English Spoken: Y

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY  
STE 203

SAN DIEGO, CA 92128

Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone: (858)  
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-TU 9AM-5PM

W 10AM-6PM

TH 9AM-5PM

F 10AM-6PM

### LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

1555 PALM AVE STE A2  
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)  
297-2020

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9:30AM-6PM  
SA 9AM-3PM

### LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

5638 MISSION CENTER RD  
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)  
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

*Gender Restriction: No Gender restriction* *Public transportation (within 1/2 mile from Site): 1T*

*American Sign Language (ASL): N* *Hours: M-F 10AM-7PM SA 10AM-7PM*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 9AM-5:30PM SA 9AM-3PM*

### **LIN, HENRY, OD**

*Provider Gender: Male*


*License Number: 11368*


*NPI: 1861405664*

*Provider English Spoken: Y*

 *Spanish, Chinese Cultural Competency: Y*

FASHION VALLEY EYE CARE OPTOMETR

 7007 FRIARS RD STE 351 SAN DIEGO, CA 92108


 *Phone: (619) 291-2020*

*Fax: (888) 210-5799*

 *After Hours Phone: (619) 291-2020*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*


 *Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

### **LIN, HENRY, OD**

*Provider Gender: Male*

*License Number: 11368*


*NPI: 1861405664*

*Provider English Spoken: Y*


 *Spanish, Chinese Cultural Competency: Y*

OPTOM-EYES VISION CARE OPTOMETRY

 1555 PALM AVE STE A2 SAN DIEGO, CA 92154

 *Phone: (619) 297-2020*

*Fax: (888) 210-5799*

 *After Hours Phone: (619) 297-2020*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 9:30AM-6PM SA 9AM-3PM*


### **LLANES, BENJAMIN, OD**

*Provider Gender: Male*

*License Number: 8782*

*NPI: 1053309005*

*Provider English Spoken: Y*


 *Spanish, Tagalog*

*Cultural Competency: Y*

SEE KLEER EYECARE CENTER

 9580 BLACK MOUNTAIN RD STE J

SAN DIEGO, CA 92126


 *Phone: (858) 536-8952*

*Fax: (858) 536-8951*

 *After Hours Phone: (858) 536-8952*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-TH 11AM-6PM F 1PM-5PM SA 9AM-1PM*

### **MARR, RYAN, OD**

*Provider Gender: Male*

*License Number: 35302*

*NPI: 1235857525*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WEST COAST EYE CARE

 4344 CONVOY ST STE C2

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

SAN DIEGO, CA 92111  
☎ Phone: (858) 565-8822  
Fax: (858) 565-2449  
🕒 After Hours Phone: (858) 565-8822  
Accepting New Patients: Yes  
🗣 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### MARR, RYAN, OD

Provider Gender: Male  
License Number: 35302  
NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
☎ Phone: (619) 697-4600  
Fax: (619) 697-2410  
🕒 After Hours Phone: (619) 697-4600  
Accepting New Patients: Yes  
🗣 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### MCCLEAN, ESMERALDA, OD

Provider Gender: Female  
License Number: 15001  
NPI: 1962817981  
Provider English Spoken: Y  
🗣 Spanish  
Cultural Competency: Y

### HILLCREST EYE

#### CENTER-UCSD

📍 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
☎ Phone: (619) 543-6244  
Fax: (619) 295-5034  
🕒 After Hours Phone: (619) 543-6244  
Accepting New Patients: Yes  
🗣 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT

PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
🕒 Hours: M-F 8AM-4PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male  
License Number: A155228  
NPI: 1588624852  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE

📍 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
☎ Phone: (619) 697-4600  
Fax: (619) 697-2410  
🕒 After Hours Phone: (619) 697-4600  
Accepting New Patients: Yes  
🗣 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610

SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Vietnamese  
Cultural Competency: Y

CLAIREMONT OPTOMETRY

10715 TIERRASANTA BLVD  
STE F

SAN DIEGO, CA 92124

Phone: (858) 279-6500

Fax: (858) 225-7174

After Hours Phone: (858)  
279-6500

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese



























Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

- N**  
 **Accessibility: CONTACT PROVIDER**  
 Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-W 9AM-6PM TH-F 9AM-5PM SA 8AM-3PM**
- NGUYEN, THANH, OD**  
 Provider Gender: Female  
 License Number: 13126  
 NPI: 1992813323  
 Provider English Spoken: Y  
 **Vietnamese**  
 Cultural Competency: Y  
**SABRE SPRINGS OPTOMETRY**  
 12650 SABRE SPGS PKWY STE 203  
 SAN DIEGO, CA 92128  
 **Phone: (858) 748-1265**  
**Fax: (844) 269-9527**  
 **After Hours Phone: (858) 748-1265**  
 Accepting New Patients: Yes  
 **Site English Spoken: Y**  
 **Site Language(s) Spoken: Spanish, Vietnamese**  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
**N**  
 **Accessibility: CONTACT PROVIDER**  
 Public transportation (within 1/2 mile from Site): 1U
-  **Hours: M-TU 9AM-5PM W 10AM-6PM TH 9AM-5PM F 10AM-6PM**
- NGUYEN, KELVIN, OD**  
 Provider Gender: Male  
 License Number: 11085  
 NPI: 1518923572  
 Provider English Spoken: Y  
 **Spanish**  
 Cultural Competency: Y  
**SD VISION CARE OPTOMETRY**  
 3807 FAIRMOUNT AVE STE 200  
 SAN DIEGO, CA 92105  
 **Phone: (619) 508-5678**  
**Fax: (619) 501-0686**  
 **After Hours Phone: (619) 508-5678**  
 Accepting New Patients: Yes  
 **Site English Spoken: Y**  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
**N**  
 **Accessibility: CONTACT PROVIDER**  
 Public transportation (within 1/2 mile from Site): 1T
- NGUYEN, BRUCE, OD**  
 Provider Gender: Male  
 License Number: 14156  
 NPI: 1376839019  
 Provider English Spoken: Y
-  **Vietnamese**  
 Cultural Competency: Y  
**SD VISION CARE OPTOMETRY**  
 3807 FAIRMOUNT AVE STE 200  
 SAN DIEGO, CA 92105  
 **Phone: (619) 508-5678**  
**Fax: (619) 501-0686**  
 **After Hours Phone: (619) 508-5678**  
 Accepting New Patients: Yes  
 **Site English Spoken: Y**  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):  
**N**  
 **Accessibility: CONTACT PROVIDER**  
 Public transportation (within 1/2 mile from Site): 1T
- NGUYEN, JASMINE, OD**  
 Provider Gender: Female  
 License Number: 11189  
 NPI: 1497896922  
 Provider English Spoken: Y  
 **Vietnamese**  
 Cultural Competency: Y  
**JASMINE P NGUYEN OD INC**  
 4029 43RD ST STE 300  
 SAN DIEGO, CA 92105  
 **Phone: (619) 284-3937**  
**Fax: (619) 284-3938**  
 **After Hours Phone: (619) 284-3937**  
 Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y N  
 Site Languages(s) Spoken: Spanish, Vietnamese  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 9AM-5PM SA 9AM-1PM

### NGUYEN, THANH, OD

Provider Gender: Female  
 License Number: 13126  
 NPI: 1992813323  
 Provider English Spoken: Y

Vietnamese  
 Cultural Competency: Y  
 JASMINE P NGUYEN OD INC

4029 43RD ST STE 300  
 SAN DIEGO, CA 92105  
 Phone: (619) 284-3937  
 Fax: (619) 284-3938

After Hours Phone: (619) 284-3937  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Vietnamese  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 9AM-5PM SA 9AM-1PM

### O HALLORAN, HENRY, MD

Provider Gender: Male  
 License Number: A73282  
 NPI: 1235287947

Provider English Spoken: Y  
 German, Spanish  
 Cultural Competency: Y

RADY CHILDRENS  
 SPECIALISTS

7910 FROST ST STE 200  
 SAN DIEGO, CA 92123  
 Phone: (858) 309-7702  
 Fax: (858) 966-8901

After Hours Phone: (858) 309-7702  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 7AM-5PM

### PATEL, SARJAN, MD

Provider Gender: Male  
 License Number: A114976  
 NPI: 1316199326  
 Provider English Spoken: Y

Gujarati, Hindi, Spanish  
 Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
 SAN DIEGO, CA 92111  
 Phone: (858) 565-8822  
 Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM  
 TU 8:30AM-5PM  
 W 7:30AM-4PM  
 TH 9:30AM-5PM  
 F 8AM-4PM

### PATEL, GITANE, MD

Provider Gender: Male  
 License Number: A108603  
 NPI: 1710171434

Provider English Spoken: Y  
 Cultural Competency: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

### WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish  
Cultural Competency: Y

### WEST COAST EYE CARE

6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

### WEST COAST EYE CARE

6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### PHAM, TONY, OD

Provider Gender: Male

License Number: 12348

NPI: 1841271434

Provider English Spoken: Y

Spanish, Vietnamese  
Cultural Competency: Y

### MIRA MESA EYECARE

6755 MIRA MESA BLVD STE  
141

SAN DIEGO, CA 92121

Phone: (858) 535-8282

Fax: (858) 535-0537

After Hours Phone: (858)  
535-8282

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

🕒 | Hours: M-TU 9:30AM-6PM  
TH-F 9:30AM-6PM

### **PHUNG, RICHARD N V, OD**

Provider Gender: Male

License Number: 9547

NPI: 1689661571

Provider English Spoken: Y

🗳 | Vietnamese, Chinese

Cultural Competency: Y

SCRIPPS RANCH OPTOMETRI  
CTR

📍 | 9880 HIBERT ST STE E1  
SAN DIEGO, CA 92131

📞 | Phone: (858) 693-9044

Fax: (858) 693-0704

🕒 | After Hours Phone: (858)  
693-9044

Accepting New Patients: Yes

🗳 | Site English Spoken: Y

🗳 | Site Languages(s) Spoken:  
Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ | Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 | Hours: M 10AM-6PM  
TU 10AM-2PM  
W-TH 10AM-6PM  
F 9AM-2PM  
SA 9AM-2PM

### **POUSTI, SHEIVA, OD**

Provider Gender: Female

License Number: 10403

NPI: 1730240052

Provider English Spoken: Y

Cultural Competency: Y

SAN DIEGO EYE CLINIC  
OPTOMETRY

📍 | 3560 FAIRMOUNT AVE STE  
A  
SAN DIEGO, CA 92105

📞 | Phone: (619) 431-2020

Fax: (619) 376-2100

🕒 | After Hours Phone: (619)  
431-2020

Accepting New Patients: Yes

🗳 | Site English Spoken: Y

🗳 | Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ | Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 | Hours: SU-SA 9AM-6PM

### **PRABHU, SUJATA, MD**

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

🗳 | Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 | 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

📞 | Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 | After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

🗳 | Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ | Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 | Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### **PRABHU, SUJATA, MD**

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

🗳 | Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 | 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

📞 | Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 | After Hours Phone: (858)  
565-8822

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM  
 TU 8:30AM-5PM  
 W 7:30AM-4PM  
 TH 9:30AM-5PM  
 F 8AM-4PM

### SANDOC, EMILY, OD

Provider Gender: Female  
 License Number: 13535  
 NPI: 1992969794

Provider English Spoken: Y  
 Cultural Competency: Y  
 OPTOM-EYES VISION CARE  
 OPTOMETRY

5638 MISSION CENTER RD  
 STE 103  
 SAN DIEGO, CA 92108  
 Phone: (619) 295-2900  
 Fax: (888) 210-5799

After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM  
 SA 9AM-3PM

### SHULKIN, MITCHELL, OD

Provider Gender: Male  
 License Number: 8153  
 NPI: 1770531865

Provider English Spoken: Y  
 Cultural Competency: Y

NORTH COUNTY OPTOMETRY

11835 CARMEL MTN RD  
 STE 1313  
 SAN DIEGO, CA 92128  
 Phone: (858) 674-1276  
 Fax: (858) 674-5863

After Hours Phone: (858) 674-1276

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1T  
 Hours: M 9AM-4PM  
 TU 7AM-1PM  
 W-TH 10AM-6PM  
 F 10AM-3PM  
 SA 9AM-2PM

### SOLIS, KEVIN, OD

Provider Gender: Male  
 License Number: 10420  
 NPI: 1538362116

Provider English Spoken: Y  
 Cultural Competency: Y  
 OPTOM-EYES VISION CARE  
 OPTOMETRY

5638 MISSION CENTER RD  
 STE 103  
 SAN DIEGO, CA 92108  
 Phone: (619) 295-2900  
 Fax: (888) 210-5799

After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM  
 SA 9AM-3PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **SOLIS, KEVIN, OD**

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE  
OPTOMETR

7007 FRIARS RD STE 351  
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)  
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 10AM-7PM  
SA 10AM-7PM

### **SOLIS, KEVIN, OD**

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

### OPTOMETRY

1555 PALM AVE STE A2  
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)  
297-2020

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9:30AM-6PM  
SA 9AM-3PM

### **TA, TRANG, OD**

Provider Gender: Female

License Number: 12100

NPI: 1518381045

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300  
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)  
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM  
SA 9AM-1PM

### **TAM, MAY, OD**

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Spanish

Cultural Competency: Y

FASHION VALLEY EYE CARE  
OPTOMETR

7007 FRIARS RD STE 351  
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)  
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

- N**  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 10AM-7PM SA 10AM-7PM*
- TAM, MAY, OD**  
*Provider Gender: Female*  
*License Number: 11960*  
*NPI: 1548255896*  
*Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: Y*  
 OPTOM-EYES VISION CARE OPTOMETRY  
 5638 MISSION CENTER RD STE 103  
 SAN DIEGO, CA 92108  
 *Phone: (619) 295-2900*  
*Fax: (888) 210-5799*  
 *After Hours Phone: (619) 295-2900*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*
- N**  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*
-  *Hours: M-F 9AM-5:30PM SA 9AM-3PM*
- TAM, MAY, OD**  
*Provider Gender: Female*  
*License Number: 11960*  
*NPI: 1548255896*  
*Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: Y*  
 OPTOM-EYES VISION CARE OPTOMETRY  
 1555 PALM AVE STE A2  
 SAN DIEGO, CA 92154  
 *Phone: (619) 297-2020*  
*Fax: (888) 210-5799*  
 *After Hours Phone: (619) 297-2020*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*
- N**  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 9:30AM-6PM SA 9AM-3PM*
- TILLMAN, SYLVIA, OD**  
*Provider Gender: Female*  
*License Number: 9726*  
*NPI: 1174730824*  
*Provider English Spoken: Y*
- Cultural Competency: Y*  
 JASMINE P NGUYEN OD INC  
 4029 43RD ST STE 300  
 SAN DIEGO, CA 92105  
 *Phone: (619) 284-3937*  
*Fax: (619) 284-3938*  
 *After Hours Phone: (619) 284-3937*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish, Vietnamese*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*
- N**  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 9AM-5PM SA 9AM-1PM*
- TON-NU, MY LINH, OD**  
*Provider Gender: Female*  
*License Number: 34990*  
*NPI: 1245733476*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
 WEST COAST EYE CARE  
 6945 EL CAJON BLVD  
 SAN DIEGO, CA 92115  
 *Phone: (619) 697-4600*  
*Fax: (619) 697-2410*  
 *After Hours Phone: (619) 697-4600*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280


Provider English Spoken: Y

Vietnamese


Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280


Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 697-4600

Fax: (619) 697-2410

 After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### TRANG, CHAU, OD

Provider Gender: Female

License Number: 9556

NPI: 1073671087

Provider English Spoken: Y

French, Spanish,  
Vietnamese, Chinese

Cultural Competency: Y

CHAU H TRANG OD

6947 LINDA VISTA RD STE  
A

SAN DIEGO, CA 92111

Phone: (858) 495-0592

Fax: (858) 495-0560

After Hours Phone: (858)  
495-0592

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
French, Spanish,  
Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 10AM-3PM  
W 10AM-3PM  
F 10AM-5PM  
SA 9AM-1PM

### TU, CHARLES, OD

Provider Gender: Male

License Number: 34618

NPI: 1073137691

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE  
OPTOMETRY

1555 PALM AVE STE A2  
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)  
297-2020

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9:30AM-6PM  
SA 9AM-3PM

### VAN HOOSE, MARC, OD

Provider Gender: Male

License Number: 12667

NPI: 1932280054

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC  
CORPORATION

7246 CLAIREMONT MESA  
BLVD  
SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)  
292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

<p>N   <i>Accessibility: CONTACT PROVIDER</i>  <i>Public transportation (within 1/2 mile from Site): 1T</i>   <i>Hours: M 8AM-5PM            TU-TH 9AM-6PM            F 8AM-5PM</i></p>	<p><i>TH 9:30AM-5PM            F 8AM-4PM</i></p> <p><b>VO, ANDREW MINH, OD</b>  <i>Provider Gender: Male            License Number: 33869            NPI: 1790291565            Provider English Spoken: Y</i>   <i>Vietnamese            Cultural Competency: Y</i>            HILLCREST EYE            CENTER-UCSD   4060 4TH AVE STE 610            SAN DIEGO, CA 92103   <i>Phone: (619) 543-6244            Fax: (619) 295-5034</i>   <i>After Hours Phone: (619) 543-6244</i>  <i>Accepting New Patients: Yes</i>   <i>Site English Spoken: Y            Min/Max Age: 0\None            Gender Restriction: No Gender restriction</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>  <i>Public transportation (within 1/2 mile from Site): 1T</i>   <i>Hours: M-F 8AM-4PM</i></p>	<p><i>Cultural Competency: Y</i>            HILLCREST EYE            CENTER-UCSD   4060 4TH AVE STE 610            SAN DIEGO, CA 92103   <i>Phone: (619) 543-6244            Fax: (619) 295-5034</i>   <i>After Hours Phone: (619) 543-6244</i>  <i>Accepting New Patients: Yes</i>   <i>Site English Spoken: Y            Min/Max Age: 0\None            Gender Restriction: No Gender restriction</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>  <i>Public transportation (within 1/2 mile from Site): 1T</i>   <i>Hours: M-F 8AM-4PM</i></p>
<p><b>VIVIRITO, MARY, OD</b>  <i>Provider Gender: Female            License Number: 33798            NPI: 1477968667            Provider English Spoken: Y</i>   <i>Spanish            Cultural Competency: Y</i>            WEST COAST EYE CARE   4344 CONVOY ST STE C2            SAN DIEGO, CA 92111   <i>Phone: (858) 565-8822            Fax: (858) 565-2449</i>   <i>After Hours Phone: (858) 565-8822</i>  <i>Accepting New Patients: Yes</i>   <i>Site English Spoken: Y            Min/Max Age: 0\None            Gender Restriction: No Gender restriction</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>  <i>Public transportation (within 1/2 mile from Site): 1U</i>   <i>Hours: M 10AM-6PM            TU 8:30AM-5PM            W 7:30AM-4PM</i></p>	<p> 4060 4TH AVE STE 610            SAN DIEGO, CA 92103   <i>Phone: (619) 543-6244            Fax: (619) 295-5034</i>   <i>After Hours Phone: (619) 543-6244</i>  <i>Accepting New Patients: Yes</i>   <i>Site English Spoken: Y            Min/Max Age: 0\None            Gender Restriction: No Gender restriction</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>  <i>Public transportation (within 1/2 mile from Site): 1T</i>   <i>Hours: M-F 8AM-4PM</i></p>	<p><b>ZAIDI, NOORINA, OD</b>  <i>Provider Gender: Female            License Number: 35615            NPI: 1023477262            Provider English Spoken: Y            Cultural Competency: Y</i>            WEST COAST EYE CARE   6945 EL CAJON BLVD            SAN DIEGO, CA 92115   <i>Phone: (619) 697-4600            Fax: (619) 697-2410</i>   <i>After Hours Phone: (619) 697-4600</i>  <i>Accepting New Patients: Yes</i>   <i>Site English Spoken: Y</i></p>
<p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Public transportation (within 1/2 mile from Site): 1U</i>   <i>Hours: M 10AM-6PM            TU 8:30AM-5PM            W 7:30AM-4PM</i></p>	<p><b>YU, CAROL, OD</b>  <i>Provider Gender: Female            License Number: 34047            NPI: 1639697451            Provider English Spoken: Y</i>   <i>Spanish, Chinese</i></p>	<p> 6945 EL CAJON BLVD            SAN DIEGO, CA 92115   <i>Phone: (619) 697-4600            Fax: (619) 697-2410</i>   <i>After Hours Phone: (619) 697-4600</i>  <i>Accepting New Patients: Yes</i>   <i>Site English Spoken: Y</i></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### **ZAIDI, NOORINA, OD**

Provider Gender: Female

License Number: 35615


NPI: 1023477262

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### **ZHAO, TAILUN, MD**

Provider Gender: Male

License Number: C186414


NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

## **SAN MARCOS**

### **GARFF, KEVIN, MD**

Provider Gender: Male

License Number: A160988

NPI: 1609258920

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

 100 N RANCHO SANTA FE  
RD STE 12

SAN MARCOS, CA 92069

 Phone: (760) 598-0400

Fax: (760) 249-7394

 After Hours Phone: (760) 598-0400

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Language(s) Spoken: Spanish, Thai


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **GUAN, HOWARD, MD**

Provider Gender: Male

License Number: A119766

NPI: 1134427636

Provider English Spoken: Y

 Spanish, Chinese

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*  
**RSF OPHTHALMOLOGY**  
 100 N RANCHO SNTA FE RD STE 12  
 SAN MARCOS, CA 92069  
 Phone: (760) 598-0400  
 Fax: (760) 249-7394

After Hours Phone: (760) 598-0400  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Thai  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **PRESTERA, TORY, MD**

Provider Gender: Male  
 License Number: A62321  
 NPI: 1346224557  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y

**RSF OPHTHALMOLOGY**  
 100 N RANCHO SNTA FE RD STE 12  
 SAN MARCOS, CA 92069  
 Phone: (760) 598-0400  
 Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Thai  
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **SKAY, RICHARD, OD**

Provider Gender: Male  
 License Number: 7649  
 NPI: 1639251945  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 RICHARD M SKAY OD

1903 W SAN MARCOS BLVD STE 130  
 SAN MARCOS, CA 92078  
 Phone: (760) 727-2211  
 Fax: (760) 727-2533

After Hours Phone: (760) 727-2211

Accepting New Patients: Yes

Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 9AM-3PM

### **TA, MINI, OD**

Provider Gender: Female  
 License Number: 15170  
 NPI: 1578955605  
 Provider English Spoken: Y  
 Cultural Competency: Y

**NEW OPTIX OPTOMETRY**  
 640 GRAND AVE STE 101  
 SAN MARCOS, CA 92078  
 Phone: (760) 736-0020  
 Fax: (760) 736-0019

After Hours Phone: (760) 736-0020  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Vietnamese  
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9AM-5PM  
 TU 9AM-6PM  
 W 9AM-5PM  
 TH 9AM-6PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

F 9AM-5PM

### THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101  
SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760)  
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 9AM-5PM  
TU 9AM-6PM  
W 9AM-5PM  
TH 9AM-6PM  
F 9AM-5PM

### TRAN, MICHAEL, OD

Provider Gender: Male

License Number: 14530

NPI: 1649524216

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101  
SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760)  
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 9AM-5PM  
TU 9AM-6PM  
W 9AM-5PM  
TH 9AM-6PM  
F 9AM-5PM

### SPRING VALLEY

#### FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

9628 CAMPO RD STE C  
SPRING VALLEY, CA 91977

Phone: (619) 463-9318

Fax: (619) 463-9640

After Hours Phone: (619)  
463-9318

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 9AM-5:30PM  
W-TH 9AM-5PM  
F 9AM-4PM

#### HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

9628 CAMPO RD STE C  
SPRING VALLEY, CA 91977

Phone: (619) 463-9318

Fax: (619) 463-9640

After Hours Phone: (619)  
463-9318

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
 Hours: M 9AM-5PM  
TU 9AM-5:30PM  
W-TH 9AM-5PM  
F 9AM-4PM

### JOHNSON, CHRISTOPHER, OD

Provider Gender: Male  
License Number: 15100  
NPI: 1568861425  
Provider English Spoken: Y  
Cultural Competency: Y

### JOHN C FLEMING OD

9628 CAMPO RD STE C  
SPRING VALLEY, CA 91977  
 Phone: (619) 463-9318  
Fax: (619) 463-9640  
 After Hours Phone: (619) 463-9318

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 9AM-5:30PM  
W-TH 9AM-5PM  
F 9AM-4PM

### KALRA, ANKUR, OD

Provider Gender: Male  
License Number: 11898  
NPI: 1124195789  
Provider English Spoken: Y

Hindi  
Cultural Competency: Y  
EYE CARE OPTOMETRY ASSOCIATES

687 SWEETWATER RD  
SPRING VALLEY, CA 91977  
 Phone: (619) 466-9444  
Fax: (619) 466-9314

After Hours Phone: (619) 466-9444

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Arabic, Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-6PM  
SA 9AM-5PM

### KEDDINGTON, JOAN, OD

Provider Gender: Female  
License Number: 6263  
NPI: 1992872691  
Provider English Spoken: Y

Spanish  
Cultural Competency: Y  
EYE CARE OPTOMETRY ASSOCIATES

687 SWEETWATER RD  
SPRING VALLEY, CA 91977  
 Phone: (619) 466-9444  
Fax: (619) 466-9314

After Hours Phone: (619) 466-9444

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken: Arabic, Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9AM-6PM  
SA 9AM-5PM

### KING, MARY, OD

Provider Gender: Female  
License Number: 13711  
NPI: 1578792107  
Provider English Spoken: Y

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## J. 眼科提供者名录 - 眼科和视力服务


 Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD  
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)  
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F 9AM-6PM  
SA 9AM-5PM

### **NGUYEN, THERESA, OD**

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713


Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD  
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)  
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F 9AM-6PM  
SA 9AM-5PM

### **SOLIS, KEVIN, OD**

Provider Gender: Male

License Number: 10420

NPI: 1538362116


Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD  
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)  
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F 9AM-6PM  
SA 9AM-5PM

### **TOUBIA, ELIAS, OD**

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y


Arabic

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

 687 SWEETWATER RD  
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)  
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Arabic, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM  
SA 9AM-5PM

### VALLEY CENTER

#### JOYCE, ROBERT, OD

Provider Gender: Male

License Number: 11833

NPI: 1275585127

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

📍 29115 VALLEY CENTER RD  
STE E  
VALLEY CENTER, CA 92082

☎ Phone: (760) 751-8771

Fax: (760) 751-8772

📞 After Hours Phone: (760)  
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9AM-6PM  
TU-F 9AM-5PM

#### LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

📍 29115 VALLEY CENTER RD  
STE E  
VALLEY CENTER, CA 92082

☎ Phone: (760) 751-8771

Fax: (760) 751-8772

📞 After Hours Phone: (760)  
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9AM-6PM  
TU-F 9AM-5PM

### VISTA

#### DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518

Provider English Spoken: Y

Spanish

Cultural Competency: Y

SHADOWRIDGE FAMILY  
VISION

📍 741 SHADOWRIDGE DR  
VISTA, CA 92083

☎ Phone: (760) 727-1844

Fax: (760) 727-3044

📞 After Hours Phone: (760)  
727-1844

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-6PM  
W 7AM-5PM  
TH 9AM-6PM

#### GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Spanish





Cultural Competency: Y

BRUCE D GEORGE OD



📍 931 ANZA AVE STE B



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

VISTA, CA 92084  
 Phone: (760) 758-2340  
 Fax: (760) 867-2222  
 After Hours Phone: (760) 758-2340  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M 9AM-5PM  
 TU-W 9AM-6PM  
 TH-F 9AM-5PM

### GEORGE, BRUCE, OD

Provider Gender: Male  
 License Number: 7696  
 NPI: 1356414551  
 Provider English Spoken: Y  
 Korean, Spanish  
 Cultural Competency: Y  
 BRUCE D GEORGE OD  
 931 ANZA AVE STE B  
 VISTA, CA 92084  
 Phone: (760) 758-2340  
 Fax: (760) 867-2222  
 After Hours Phone: (760) 758-2340  
 Accepting New Patients: Yes  
 Site English Spoken: Y

Site Languages(s) Spoken: N  
 Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M 9AM-5PM  
 TU-W 9AM-6PM  
 TH-F 9AM-5PM

### TRAN, THAO, OD

Provider Gender: Female  
 License Number: 12867  
 NPI: 1962581421  
 Provider English Spoken: Y  
 Vietnamese  
 Cultural Competency: Y  
 KINDERSPECS-GOOD EYES  
 OPTOMETRY  
 110 CIVIC CENTER DR STE 204  
 VISTA, CA 92084  
 Phone: (760) 753-3665  
 Fax: (408) 969-1653  
 After Hours Phone: (760) 753-3665  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

ECM 重点群体 (POF) 表

ECM 重点群体 (POF)			成人	儿童及青少年
	1	无家可归者	✓	✓
	2	面临可避免的医院或 ED 使用风险者（正式称为“高使用者”）	✓	✓
	3	有严重心理健康和/或药物滥用障碍需求者	✓	✓
	4	从监禁中过渡者	✓	✓
	5	生活在社区中且面临长期护理机构收容风险的成年人	✓	
	6	过渡到社区的成人护理机构居民	✓	
	7	加入加州儿童服务 (CCS) 或 CCS 全儿童模式 (WCM) 的儿童及青少年，除了 CCS 条件外还有其他需求		✓
	8	参与儿童福利的儿童及青少年		✓
	9	出生公平性重点人群	✓	✓



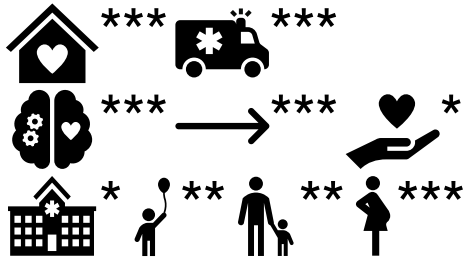
## K. 其他服务提供者（社区支持、强化护理管理）

### EL CAJON

#### LA MAESTRA COMMUNITY HEALTH CENTERS

📍 165 S 1ST ST  
EL CAJON, CA 92019  
☎️ Phone: (619) 510-4641  
🕒 After Hours Phone: (619) 510-4641  
♿️ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:

ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and  
Existing Patients: (619)

510-4641

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct

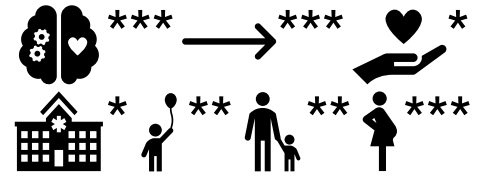
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider

Services-Pre-Release Services  
and Participating in Warm  
Handoffs

#### LA MAESTRA COMMUNITY HEALTH CENTERS

📍 165 S 1ST ST  
EL CAJON, CA 92019  
☎️ Phone: (619) 510-4641  
🕒 After Hours Phone: (619) 510-4641  
♿️ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:

ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and  
Existing Patients: (619)  
510-4641

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider

Services-Pre-Release Services  
and Participating in Warm  
Handoffs

### ENCINITAS

\*成人 \*\*儿童 \*\*\*成人和儿童

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

### SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL STE B149

ENCINITAS, CA 92024

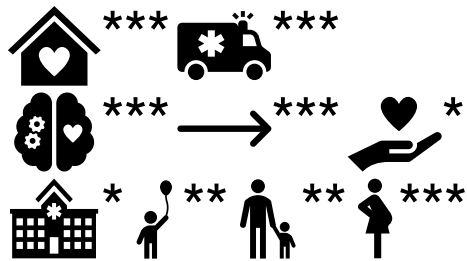
Phone: (619) 273-3295

After Hours Phone: (619) 273-3295

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

referrals@sdsdwellnesscollaborative.org

Phone for New Referrals and Existing Patients: (619)

273-3295

Mailing Address: 1084 N EL CAMINO REAL STE

B-149; Encinitas; CA; 92024

J1 ECM Provider Billing- FFS (PAVE Enrollment)

J1 ECM Provider

Services-Pre-Release Services and Participating in Warm

Handoffs; J1 ECM Provider

Services-Warm Handoffs Only

### ESCONDIDO

### INTERFAITH COMMUNITY SERVICES

550 W WASHINGTON AVE ESCONDIDO, CA 92025

Phone: (760) 489-6380

After Hours Phone: (760) 489-6380

Accessibility: CONTACT PROVIDER

Website: N/A

Community Supports Services:

Housing Deposits, Housing

Team and Sustaining

Services, Housing Transition

Navigation

Services, Recuperative Care (Medical Respite), Short-Term

Post-Hospitalization Housing

Street Medicine Provider: N

Phone for New Referrals and Existing Patients: (760)

489-6380

### IMPERIAL BEACH

### IMPERIAL BEACH HEALTH CENTER

949 PALM AVE

IMPERIAL BEACH, CA

91932

Phone: (619) 429-3733

After Hours Phone: (619) 429-3733

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

tsadlowski@ibclinic.org

Phone for New Referrals and  
Existing Patients: (619)

429-3733



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

ECM.CS@LAMAESTRA.ORG

Phone for New Referrals and  
Existing Patients: (619)

510-4641

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider

Services-Pre-Release Services  
and Participating in Warm  
Handoffs

7967 BROADWAY  
LEMON GROVE, CA 91945

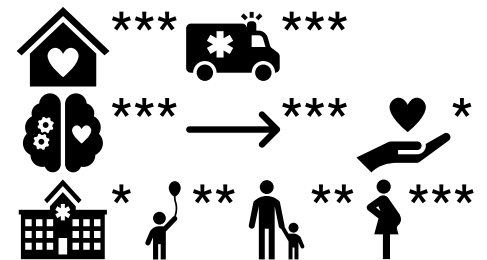
Phone: (619) 510-4641

After Hours Phone: (619)  
510-4641

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

ECM.CS@LAMAESTRA.ORG

Phone for New Referrals and  
Existing Patients: (619)

510-4641

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

### LEMON GROVE

#### LA MAESTRA COMMUNITY HEALTH CENTERS

7967 BROADWAY  
LEMON GROVE, CA 91945

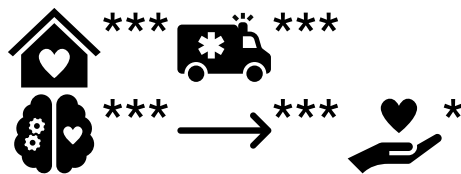
Phone: (619) 510-4641

After Hours Phone: (619)  
510-4641

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



#### LA MAESTRA COMMUNITY HEALTH CENTERS

\*成人 \*\*儿童 \*\*\*成人和儿童

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：






blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

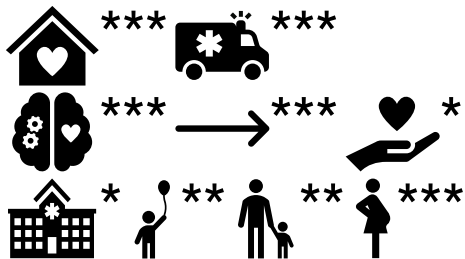
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### NATIONAL CITY

#### LA MAESTRA COMMUNITY HEALTH CENTERS

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
 Phone: (619) 510-4641  
 After Hours Phone: (619) 510-4641  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

*ECM Population of Focus:*






*Community Supports Services: N/A  
Street Medicine Provider: N  
Email for New Referrals and Existing Patients:  
ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and Existing Patients: (619) 510-4641*

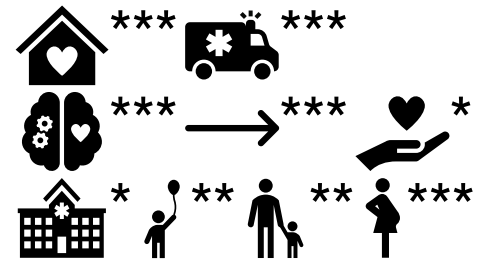
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*

*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

#### LA MAESTRA COMMUNITY HEALTH CENTERS

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
 Phone: (619) 510-4641

 After Hours Phone: (619) 510-4641  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
*ECM Population of Focus:*



*Community Supports Services: N/A  
Street Medicine Provider: N  
Email for New Referrals and Existing Patients:  
ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and Existing Patients: (619) 510-4641*

*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105  
JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider*

\*成人 \*\*儿童 \*\*\*成人和儿童

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## K. 其他服务提供者（社区支持、强化护理管理）

Billing- FFS (PAVE Enrollment)  
 JI ECM Provider  
 Services-Pre-Release Services  
 and Participating in Warm  
 Handoffs

### ORINDA

#### PATHWAY HOME SOLUTIONS INC

2 BIRCH CT  
 ORINDA, CA 94563  
 Phone: (209) 601-0734  
 After Hours Phone: (209)  
 601-0734  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A

Community Supports Services:  
 Environmental Accessibility  
 Adaptations (Home  
 Modifications)  
 Street Medicine Provider: N  
 Phone for New Referrals and  
 Existing Patients: (209)  
 601-0734

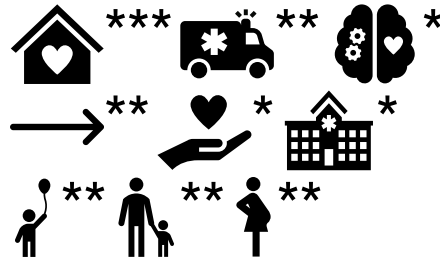
### SACRAMENTO

#### FULL CIRCLE HEALTH

#### NETWORK

2201 K ST  
 SACRAMENTO, CA 95816  
 Phone: (888) 749-8877  
 After Hours Phone: (888)  
 749-8877  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A

ECM Population of Focus:



Community Supports Services:  
 N/A  
 Street Medicine Provider: N  
 Email for New Referrals and  
 Existing Patients:  
 network@fullcirclehn.org  
 Phone for New Referrals and  
 Existing Patients: (888)  
 749-8877

Mailing Address: 2201 K  
 ST;SACRAMENTO;CA;95816

Ji ECM Provider Billing- FFS  
 (PAVE Enrollment)  
 Ji ECM Provider  
 Services-Pre-Release Services  
 and Participating in Warm  
 Handoffs

### SAN DIEGO

#### 2-1-1 SAN DIEGO

3860 CALLE FORTUNADA  
 SAN DIEGO, CA 92123  
 Phone: (818) 370-8184  
 After Hours Phone: (818)  
 370-8184  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A

Community Supports Services:  
 Housing Tenancy and  
 Sustaining Services, Housing  
 Transition Navigation Services  
 Street Medicine Provider: N  
 Phone for New Referrals and  
 Existing Patients: (818)  
 370-8184

#### 2-1-1 SAN DIEGO

3860 CALLE FORTUNADA

\*成人 \*\*儿童 \*\*\*成人和儿童

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 时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

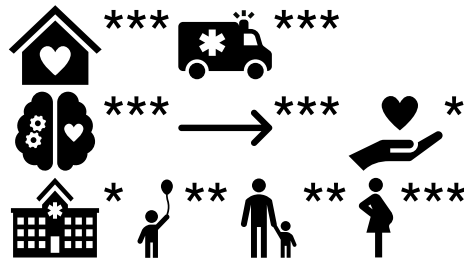
**SAN DIEGO, CA 92123**  
 Phone: (818) 370-8184  
 After Hours Phone: (818) 370-8184  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

*Community Supports Services: Housing Tenancy and Sustaining Services, Housing Transition Navigation Services*  
 Street Medicine Provider: N  
 Phone for New Referrals and Existing Patients: (818) 370-8184

### FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER WAY  
 SAN DIEGO, CA 92102  
 Phone: (619) 876-4450  
 After Hours Phone: (619) 876-4450  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

*ECM Population of Focus:*



*Community Supports Services: Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services*  
 Street Medicine Provider: N  
 Email for New Referrals and Existing Patients:

[CalAIMReferrals@fhcsd.org](mailto:CalAIMReferrals@fhcsd.org)  
 Phone for New Referrals and Existing Patients: (619) 876-4450

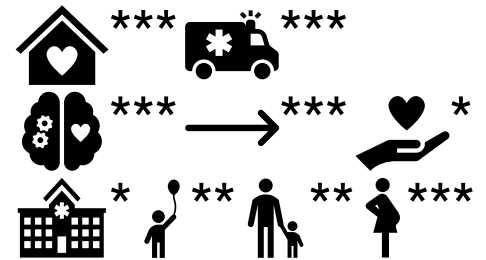
*Mailing Address: 823 GATEWAY CENTER WAY; SAN DIEGO; CA; 92102*  
*JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment)*  
*JI ECM Provider*

*Services-Pre-Release Services and Participating in Warm Handoffs*

### FAMILY HEALTH CENTERS OF SAN DIEGO

823 GATEWAY CENTER WAY  
 SAN DIEGO, CA 92102  
 Phone: (619) 876-4450  
 After Hours Phone: (619) 876-4450  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

*ECM Population of Focus:*



*Community Supports Services: Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services*

\*成人 \*\*儿童 \*\*\*成人和儿童

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街头医学 (Street Medicine) 或街头健康是为无家可归的人提供医疗保健的做法

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise Customer Care 部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：

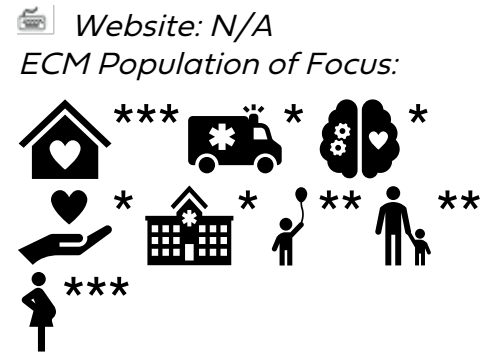
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

Street Medicine Provider: N  
 Email for New Referrals and Existing Patients:  
 CalAIMReferrals@fhcsd.org  
 Phone for New Referrals and Existing Patients: (619) 876-4450  
 Mailing Address: 823 GATEWAY CENTER WAY; SAN DIEGO; CA; 92102  
 JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs



Community Supports Services: N/A  
 Street Medicine Provider: N  
 Email for New Referrals and Existing Patients:  
 mhammel@comresearch.org  
 Phone for New Referrals and Existing Patients: (619) 507-9333



Community Supports Services: N/A  
 Street Medicine Provider: N  
 Email for New Referrals and Existing Patients:  
 tsadlowski@ibclinic.org  
 Phone for New Referrals and Existing Patients: (619) 429-3733

### HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N SAN DIEGO, CA 92108  
 Phone: (619) 507-9333  
 After Hours Phone: (619) 507-9333  
 Accessibility: CONTACT PROVIDER

### IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD SAN DIEGO, CA 92154  
 Phone: (619) 429-3733  
 After Hours Phone: (619) 429-3733  
 Accessibility: CONTACT PROVIDER

### JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE SAN DIEGO, CA 92123  
 Phone: (858) 637-3221  
 After Hours Phone: (858) 637-3221  
 Accessibility: CONTACT PROVIDER

\*成人 \*\*儿童 \*\*\*成人和儿童

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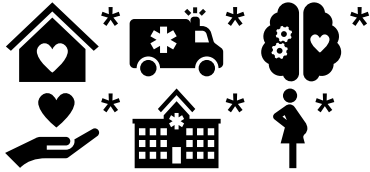
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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

 Website: N/A

ECM Population of Focus:



Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation

Services, Medically-Supportive  
Food/Meals/Medically  
Tailored Meals

Street Medicine Provider: N


Email for New Referrals and  
Existing Patients:

[calaim@jfssd.org](mailto:calaim@jfssd.org)

Phone for New Referrals and  
Existing Patients: (858)  
637-3221


### JEWISH FAMILY SERVICE OF SAN DIEGO

 8804 BALBOA AVE  
SAN DIEGO, CA 92123

 Phone: (858) 637-3221

 After Hours Phone: (858)  
637-3221

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation

Services, Medically-Supportive  
Food/Meals/Medically

Tailored Meals

Street Medicine Provider: N


Email for New Referrals and  
Existing Patients:


[calaim@jfssd.org](mailto:calaim@jfssd.org)


Phone for New Referrals and  
Existing Patients: (858)  
637-3221

### HEALTHY CONNECT SAN DIEGO

 1202 MORENA BLVD  
SAN DIEGO, CA 92110

 Phone: (619) 507-9333

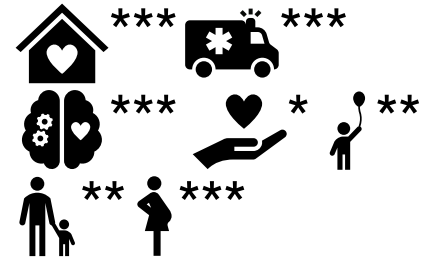
 After Hours Phone: (619)  
507-9333

 Hours: M-F 8AM-4PM

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation Services

Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:

[mhammel@comresearch.org](mailto:mhammel@comresearch.org)

\*成人 \*\*儿童 \*\*\*成人和儿童

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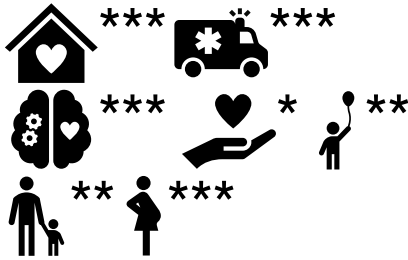


## K. 其他服务提供者（社区支持、强化护理管理）

Phone for New Referrals and Existing Patients: (619) 507-9333

### HEALTHY CONNECT SAN DIEGO

1202 MORENA BLVD  
SAN DIEGO, CA 92110  
Phone: (619) 507-9333  
After Hours Phone: (619) 507-9333  
Hours: M-F 8AM-4PM  
Accessibility: CONTACT PROVIDER  
Website: N/A  
ECM Population of Focus:

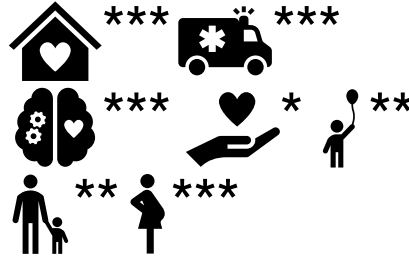


Community Supports Services:  
Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services

Street Medicine Provider: N  
Email for New Referrals and Existing Patients:  
mhammel@comresearch.org  
Phone for New Referrals and Existing Patients: (619) 507-9333

### HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N  
SAN DIEGO, CA 92108  
Phone: (619) 507-9333  
After Hours Phone: (619) 507-9333  
Accessibility: CONTACT PROVIDER  
Website: N/A  
ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N  
Email for New Referrals and Existing Patients:  
mhammel@comresearch.org  
Phone for New Referrals and Existing Patients: (619) 507-9333

### PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE  
SAN DIEGO, CA 92101  
Phone: (619) 810-8668  
After Hours Phone: (619) 810-8668  
Accessibility: CONTACT PROVIDER  
Website: N/A  
Community Supports Services:  
Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services, Recuperative Care (Medical Respite), Short-Term Post-Hospitalization Housing  
Street Medicine Provider: N  
Phone for New Referrals and

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

Existing Patients: (619)  
810-8668

### PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE

SAN DIEGO, CA 92101

Phone: (619) 810-8668

After Hours Phone: (619)  
810-8668

Accessibility: CONTACT  
PROVIDER

Website: N/A

Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation

Services, Recuperative Care  
(Medical Respite), Short-Term  
Post-Hospitalization Housing  
Street Medicine Provider: N  
Phone for New Referrals and  
Existing Patients: (619)  
810-8668

### SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

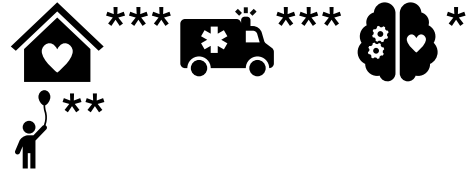
Phone: (858) 279-0925

After Hours Phone: (858)  
279-0925

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N  
Phone for New Referrals and  
Existing Patients: (858)  
279-0925

### SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

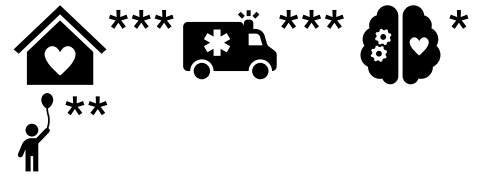
Phone: (858) 810-8700

After Hours Phone: (858)  
810-8700

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N  
Phone for New Referrals and  
Existing Patients: (858)  
810-8700

### LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

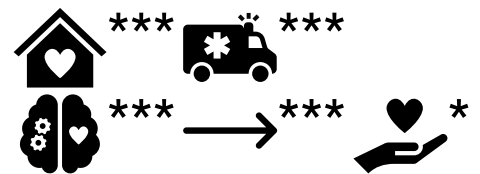
Phone: (619) 510-4641

After Hours Phone: (619)  
510-4641

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



\*成人 \*\*儿童 \*\*\*成人和儿童

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）



**Community Supports Services:**  
*Asthma Remediation, Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services*  
**Street Medicine Provider: N**  
**Email for New Referrals and Existing Patients:**

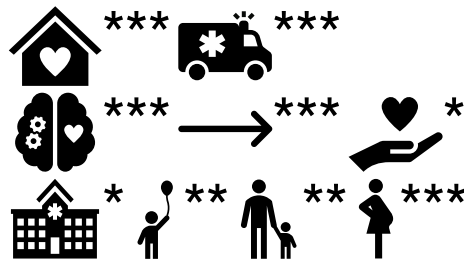
**ECM.CS@LAMAESTRA.ORG**  
**Phone for New Referrals and Existing Patients: (619) 510-4641**

**Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105**

*JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### **LA MAESTRA COMMUNITY HEALTH CENTERS**

**4060 FAIRMOUNT AVE SAN DIEGO, CA 92105**  
**Phone: (619) 510-4641**  
**After Hours Phone: (619) 510-4641**  
**Accessibility: CONTACT PROVIDER**  
**Website: N/A**  
**ECM Population of Focus:**



**Community Supports Services:**  
*Asthma Remediation, Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services*  
**Street Medicine Provider: N**  
**Email for New Referrals and Existing Patients:**  
**ECM.CS@LAMAESTRA.ORG**

*Phone for New Referrals and Existing Patients: (619) 510-4641*  
**Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105**  
*JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### **LA MAESTRA COMMUNITY HEALTH CENTERS**

**4157 FAIRMOUNT AVE SAN DIEGO, CA 92105**  
**Phone: (619) 510-4641**  
**After Hours Phone: (619) 510-4641**  
**Accessibility: CONTACT PROVIDER**  
**Website: N/A**  
**ECM Population of Focus:**

\*成人 \*\*儿童 \*\*\*成人和儿童

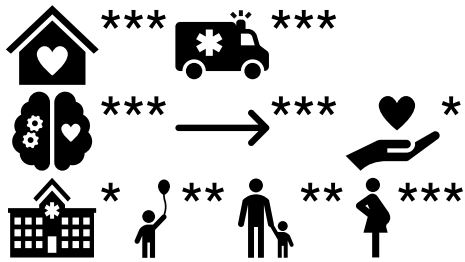
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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG

Phone for New Referrals and Existing Patients: (619) 510-4641

Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105

JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE SAN DIEGO, CA 92105

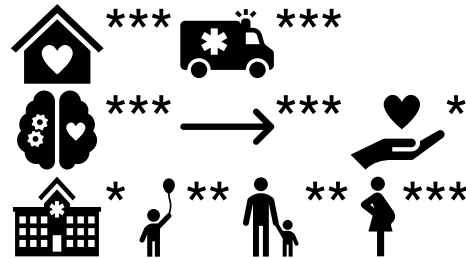
Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG

Phone for New Referrals and Existing Patients: (619)

510-4641

Mailing Address: 4060

FAIRMOUNT AVE;SAN

DIEGO;CA;92105

JI ECM Provider Billing- Direct

Contract with Correctional

Facilities;JI ECM Provider

Billing- FFS (PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services

and Participating in Warm

Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE SAN DIEGO, CA 92105

Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



\*成人 \*\*儿童 \*\*\*成人和儿童

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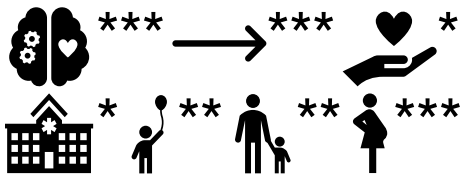
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*Community Supports Services:*  
N/A

*Street Medicine Provider:* N

*Email for New Referrals and Existing Patients:*

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*Phone for New Referrals and Existing Patients:* (619) 510-4641

*Mailing Address:* 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105

*Jl ECM Provider Billing- Direct Contract with Correctional Facilities;Jl ECM Provider Billing- FFS (PAVE Enrollment) Jl ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

**LA MAESTRA**

### COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

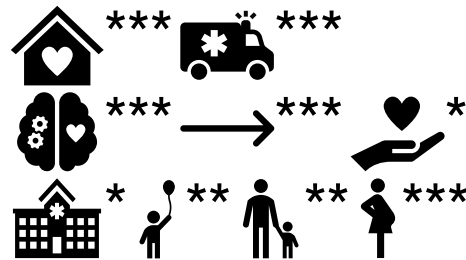
Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



*Community Supports Services:*  
N/A

*Street Medicine Provider:* N

*Email for New Referrals and Existing Patients:*

[ECM.CS@LAMAESTRA.ORG](mailto:ECM.CS@LAMAESTRA.ORG)

*Phone for New Referrals and Existing Patients:* (619) 510-4641

*Mailing Address:* 4060

FAIRMOUNT AVE;SAN DIEGO;CA;92105

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SAN DIEGO, CA 92105

Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



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Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG

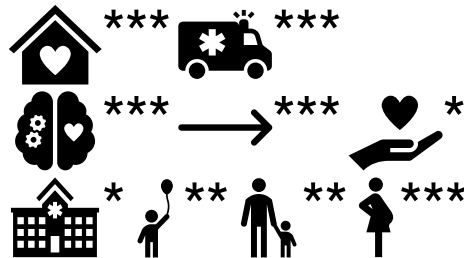
Phone for New Referrals and Existing Patients: (619) 510-4641

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COMMUNITY HEALTH  
CENTERS**

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SAN DIEGO, CA 92105  
Phone: (619) 510-4641  
After Hours Phone: (619) 510-4641  
Accessibility: CONTACT PROVIDER  
Website: N/A  
ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG

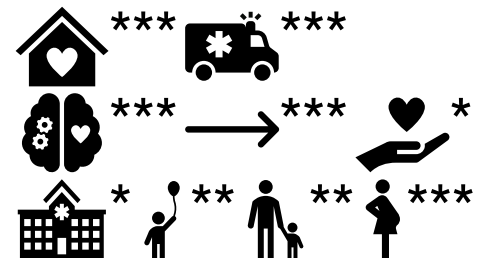
Phone for New Referrals and Existing Patients: (619) 510-4641

Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105

JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

**LA MAESTRA  
COMMUNITY HEALTH  
CENTERS**

4187 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 510-4641  
After Hours Phone: (619) 510-4641  
Accessibility: CONTACT PROVIDER  
Website: N/A  
ECM Population of Focus:



\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

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Community Supports Services: N/A

Street Medicine Provider: N  
Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and Existing Patients: (619) 510-4641

Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105

JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

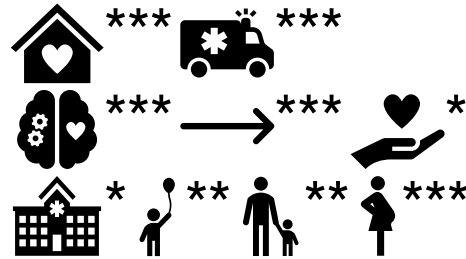
4171 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N  
Email for New Referrals and Existing Patients:

ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and Existing Patients: (619) 510-4641

Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105

JI ECM Provider Billing- Direct Contract with Correctional Facilities; JI ECM Provider

Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

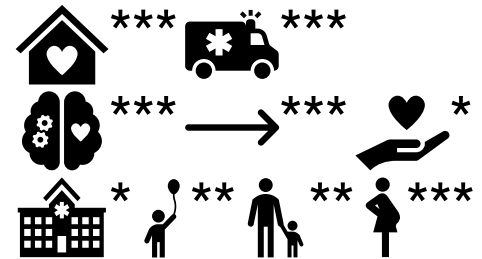
Phone: (619) 510-4641

After Hours Phone: (619) 510-4641

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N

\*成人 \*\*儿童 \*\*\*成人和儿童

†ECM 和社区支持需要事先授权，并且仅限于符合特定资格的会员。

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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise Customer Care 部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

*Email for New Referrals and Existing Patients:*

*ECM.CS@LAMAESTRA.ORG*


*Phone for New Referrals and Existing Patients: (619) 510-4641*


*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*


*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### **LA MAESTRA COMMUNITY HEALTH CENTERS**

 4187 FAIRMOUNT AVE SAN DIEGO, CA 92105

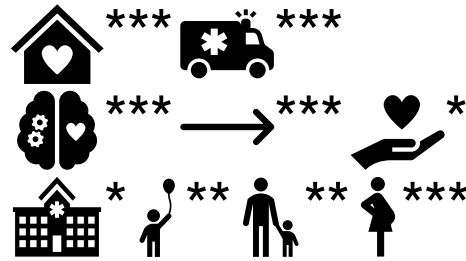
 *Phone: (619) 510-4641*

 *After Hours Phone: (619) 510-4641*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*ECM Population of Focus:*



*Community Supports Services: N/A*

*Street Medicine Provider: N*

*Email for New Referrals and Existing Patients:*

*ECM.CS@LAMAESTRA.ORG*

*Phone for New Referrals and Existing Patients: (619) 510-4641*


*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*


*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services*


*and Participating in Warm Handoffs*

### **SERENE HEALTH**

 4849 RONSON CT STE 207 SAN DIEGO, CA 92111

 *Phone: (844) 737-3638*

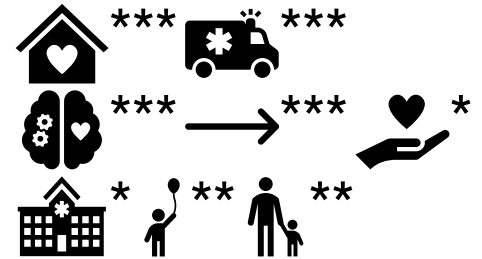
 *After Hours Phone: (844) 737-3638*

 *Hours: M-F 8:30AM-5PM*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Short-Term Post-Hospitalization Housing Street Medicine Provider: N*

\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## K. 其他服务提供者（社区支持、强化护理管理）

Phone for New Referrals and Existing Patients: (844)

737-3638

Mailing Address: 4849

RONSON CT STE 207;SAN

DIEGO;CA;92111

JI ECM Provider Billing- FFS (PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services

and Participating in Warm

Handoffs;JI ECM Provider

Services-Warm Handoffs Only

### SERENE HEALTH

4849 RONSON CT STE 207  
SAN DIEGO, CA 92111

Phone: (844) 737-3638

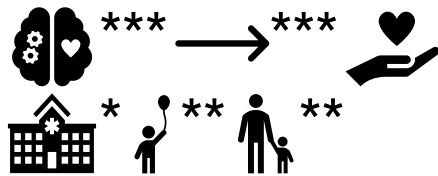
After Hours Phone: (844)  
737-3638

Hours: M-F 8:30AM-5PM

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits,Housing

Tenancy and Sustaining

Services,Housing Transition

Navigation

Services,Short-Term

Post-Hospitalization Housing

Street Medicine Provider: N

Phone for New Referrals and Existing Patients: (844)

737-3638

Mailing Address: 4849

RONSON CT STE 207;SAN

DIEGO;CA;92111

JI ECM Provider Billing- FFS (PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services

and Participating in Warm

Handoffs;JI ECM Provider

Services-Warm Handoffs Only

### LIGHTBRIDGE HOSPICE LLC

6155 CORNERSTONE CT E  
STE 220

SAN DIEGO, CA 92121

Phone: (858) 458-2992

After Hours Phone: (858)  
458-2992

Site Language(s) Spoken:  
Spanish, Tagalog

Hours: M-F 8AM-5PM

Accessibility: CONTACT  
PROVIDER

Website: www.LIGHTBRIDGEHOSPICE.com

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

JILL@LIGHTBRIDGEHOSPICE.COM

Phone for New Referrals and Existing Patients: (858)

458-2992

\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

### SAN MARCOS

#### MERAKEY ALLOS

334 VIA VERA CRUZ STE  
204  
SAN MARCOS, CA 92078

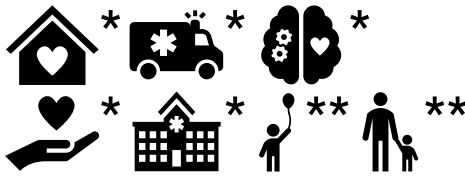
Phone: (916) 832-4868

After Hours Phone: (916)  
832-4868

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

[deborah.bowyer@merakey.org](mailto:deborah.bowyer@merakey.org)

Phone for New Referrals and  
Existing Patients: (916)  
832-4868

#### AMERICARE ADULT DAY

### HEALTH CARE CENTER

License Number: 060000832

340 RANCHEROS DR STE  
196

SAN MARCOS, CA 92069

Phone: (760) 682-2424

After Hours Phone: (760)  
682-2424

Site English Spoken: Y

Accessibility: CONTACT  
PROVIDER

Website: [www.americareadhc.com](http://www.americareadhc.com)

Cultural Competency: N

Accepting New Patients: No

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

[inashtut@americareadhc.com](mailto:inashtut@americareadhc.com)

Phone for New Referrals and  
Existing Patients: (760)  
682-2424

### VISTA

#### VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Accessibility: CONTACT  
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

[ecmteam@vcc.org](mailto:ecmteam@vcc.org)

Phone for New Referrals and  
Existing Patients: (760)  
631-5000

\*成人 \*\*儿童 \*\*\*成人和儿童

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：

[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# L. Blue Shield Promise 紧急护理设施

## CHULA VISTA

### AFC URGENT CARE OF BONITA

NPI: 1316225147

760 OTAY LAKES RD  
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300


Spanish

SU 8AM-5PM

M-F 8AM-8PM

SA 8AM-8PM

 *Accessibility:* CONTACT PROVIDER

 [www.afcurgentcare.com/chula-vista/](http://www.afcurgentcare.com/chula-vista/)

Accepting New Patients: No

### AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

760 OTAY LAKES RD  
CHULA VISTA, CA 91910


(619) 821-2300


(619) 821-2300

SU 8AM-6PM

M-F 8AM-8PM

SA 8AM-6PM

 *Accessibility:* CONTACT PROVIDER

 [www.afcurgentcare.com/santee/](http://www.afcurgentcare.com/santee/)

Accepting New Patients: No

## SAN DIEGO

### AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

5671 BALBOA AVE  
SAN DIEGO, CA 92111

(858) 800-2880


(858) 800-2880

SU 8AM-6PM

M-F 8AM-8PM

SA 8AM-6PM

 *Accessibility:* CONTACT PROVIDER

 [www.afcurgentcare.com/santee/](http://www.afcurgentcare.com/santee/)

Accepting New Patients: No

### AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

8590 RIO SAN DIEGO DR  
STE 111  
SAN DIEGO, CA 92108

(619) 736-4600


(619) 736-4600

SU 8AM-6PM

M-F 8AM-8PM

SA 8AM-6PM

 *Accessibility:* CONTACT PROVIDER

 [www.afcurgentcare.com/santee/](http://www.afcurgentcare.com/santee/)

Accepting New Patients: No

### AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

1740 ROSECRANS ST  
SAN DIEGO, CA 92106

(619) 790-7800


(619) 790-7800

SU 8AM-6PM

M-F 8AM-8PM

SA 8AM-6PM

 *Accessibility:* CONTACT PROVIDER

 [www.afcurgentcare.com/santee/](http://www.afcurgentcare.com/santee/)

Accepting New Patients: No






### AFC URGENT CARE OF SAN DIEGO

NPI: 1396058137

8260 MIRA MESA BLVD  
STE A  
SAN DIEGO, CA 92126

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## L. Blue Shield Promise 紧急护理设施


 (858) 900-3550  
 (858) 900-3550  
 SU 8AM-6PM  
M-F 8AM-8PM  
SA 8AM-6PM  
 *Accessibility:* CONTACT PROVIDER  
 [www.afcurgentcare.com/stantee/](https://www.afcurgentcare.com/stantee/)  
Accepting New Patients: No

### **AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1952995466  
 5671 BALBOA AVE  
SAN DIEGO, CA 92111  
 (858) 800-2880  
 (858) 800-2880  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### **AFC URGENT CARE OF SAN DIEGO**


*NPI:* 1558788620  
 8260 MIRA MESA BLVD  
STE A



SAN DIEGO, CA 92126  
 (858) 900-3550  
 (858) 900-3550  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### **AFC URGENT CARE OF SAN DIEGO**






*NPI:* 1952995466  
 8260 MIRA MESA BLVD  
STE A  
SAN DIEGO, CA 92126  
 (858) 900-3550  
 (858) 900-3550  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### **AFC URGENT CARE OF SAN DIEGO**


*NPI:* 1558788620  
 5671 BALBOA AVE  
SAN DIEGO, CA 92111

 (858) 800-2880  
 (858) 800-2880  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### **AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1952995466  
 8590 RIO SAN DIEGO DR  
STE 111  
SAN DIEGO, CA 92108  
 (619) 736-4600  
 (619) 736-4600  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### **AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1558788620  
 8590 RIO SAN DIEGO DR  
STE 111  
SAN DIEGO, CA 92108

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## L. Blue Shield Promise 紧急护理设施

 (619) 736-4600  
 (619) 736-4600  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### AFC URGENT CARE OF SAN DIEGO

*NPI:* 1952995466



 1740 ROSECRANS ST  
SAN DIEGO, CA 92106




 (619) 790-7800  
 (619) 790-7800  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### AFC URGENT CARE OF SAN DIEGO

*NPI:* 1558788620

 1740 ROSECRANS ST  
SAN DIEGO, CA 92106

 (619) 790-7800  
 (619) 790-7800





 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

### SANTEE

### AFC URGENT CARE OF SAN DIEGO

*NPI:* 1396058137







 10538 MISSION GORGE RD  
STE 100  
SANTEE, CA 92071

 (619) 456-0033  
 (619) 456-0033  
 Arabic, Spanish  
 SU-SA 8AM-8PM  
 *Accessibility:* CONTACT PROVIDER  
 [www.afcurgentcare.com/santee/](http://www.afcurgentcare.com/santee/)  
Accepting New Patients: No

### CHULA VISTA







### RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

*NPI:* 1669617197

 386 E H ST STE 202  
CHULA VISTA, CA 91910  
 (858) 966-1720  
 (858) 966-1720  
 SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

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 (858) 966-1720  
 SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

### RADY CHILDRENS SPECIALISTS SAN DIEGO MED


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# L. Blue Shield Promise 紧急护理设施

## **FNDTN**

*NPI:* 1669617197

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


## **RADY CHILDRENS**


### **SPECIALISTS SAN DIEGO MED**

## **FNDTN**

*NPI:* 1669617197

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


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### **SPECIALISTS SAN DIEGO MED**

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 SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


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 (858) 966-1720

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M-F 4PM-10PM

SA 1PM-10PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


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 (858) 966-1720

 SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 *Accessibility:* CONTACT PROVIDER

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Accepting New Patients: No


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### **SPECIALISTS SAN DIEGO MED**

## **FNDTN**

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CHULA VISTA, CA 91910

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 (858) 966-1720

 SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM







 *Accessibility:* CONTACT

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# L. Blue Shield Promise 紧急护理设施



PROVIDER  
 N/A  
Accepting New Patients: No

**RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FN D TN**







*NPI:* 1669617197  
 386 E H ST STE 202  
CHULA VISTA, CA 91910  
 (858) 966-1720  
 (858) 966-1720  
 SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

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SPECIALISTS SAN DIEGO MED  
FN D TN**




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 (858) 966-1720  
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M-F 4PM-10PM




SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

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SPECIALISTS SAN DIEGO MED  
FN D TN**







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 (858) 966-1720  
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M-F 4PM-10PM  
SA 1PM-10PM  
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 N/A  
Accepting New Patients: No

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FN D TN**


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CHULA VISTA, CA 91910  
 (858) 966-1720  
 (858) 966-1720

 SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
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 N/A  
Accepting New Patients: No

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SPECIALISTS SAN DIEGO MED  
FN D TN**






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CHULA VISTA, CA 91910  
 (858) 966-1720  
 (858) 966-1720  
 SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

**RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FN D TN**

*NPI:* 1669617197  
 386 E H ST STE 202  
CHULA VISTA, CA 91910

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## L. Blue Shield Promise 紧急护理设施

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#### **FNDTN**



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# L. Blue Shield Promise 紧急护理设施


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Accepting New Patients: No


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Accepting New Patients: No


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Accepting New Patients: No


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# L. Blue Shield Promise 紧急护理设施




SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**







*NPI:* 1669617197  
 386 E H ST STE 202  
CHULA VISTA, CA 91910  
 (858) 966-1720  
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Accepting New Patients: No

## **ESCONDIDO**

## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197  
 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
 (760) 755-7600  
 (760) 755-7600  
 M-F 8AM-5PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No







## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**







*NPI:* 1669617197





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## L. Blue Shield Promise 紧急护理设施







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# L. Blue Shield Promise 紧急护理设施







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PROVIDER  
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Accepting New Patients: No

**LA MESA  
RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FN D TN**

**FN D TN**

*NPI:* 1669617197  
 5565 GROSSMONT  
CENTER DR STE 2  
LA MESA, CA 91942  
 (858) 576-1700  
 (858) 576-1700  
 *Accessibility:* CONTACT  
PROVIDER  
 N/A  
Accepting New Patients: No

**RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FN D TN**


*NPI:* 1669617197  
 5565 GROSSMONT  
CENTER DR STE 2  
LA MESA, CA 91942  
 (858) 576-1700  
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# L. Blue Shield Promise 紧急护理设施

*NPI:* 1669617197

 5565 GROSSMONT  
CENTER DR STE 2  
LA MESA, CA 91942

 (619) 713-5375  
 (619) 713-5375


 *Accessibility:* CONTACT PROVIDER



 N/A

Accepting New Patients: No

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*NPI:* 1669617197

 5565 GROSSMONT  
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 (619) 713-5375  
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 N/A

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 N/A



Accepting New Patients: No

**RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FNDTN**

*NPI:* 1669617197

 5565 GROSSMONT

CENTER DR STE 2  
LA MESA, CA 91942

 (619) 713-5375  
 (619) 713-5375


 *Accessibility:* CONTACT PROVIDER



 N/A

Accepting New Patients: No

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# L. Blue Shield Promise 紧急护理设施





LA MESA, CA 91942  
 (858) 576-1700  
 (858) 576-1700  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
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## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**






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# L. Blue Shield Promise 紧急护理设施

## **FNDTN**

*NPI:* 1669617197

 5565 GROSSMONT  
CENTER DR STE 2  
LA MESA, CA 91942

 (619) 713-5375

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 *Accessibility:* CONTACT  
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## **RADY CHILDRENS**


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## **OCEANSIDE**

## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 (760) 547-1020  
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 *Accessibility:* CONTACT PROVIDER  
 N/A

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# L. Blue Shield Promise 紧急护理设施

**PROVIDER**  
 N/A  
Accepting New Patients: No






**RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FNDTN**

*NPI:* 1669617197  
 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
 (760) 547-1020  
 (760) 547-1020  
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 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905


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## SAN DIEGO

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*NPI:* 1669617197

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

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


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*NPI:* 1669617197

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SAN DIEGO, CA 92105

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 (619) 280-2905

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Accepting New Patients: No


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 3020 CHILDRENS WAY  
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### **RCH MID CITY URGENT CARE**

*NPI:* 1710065933

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SA 1PM-10PM

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### **SOUTHBAY URGENT CARE INC**

*NPI:* 1558746750

 1628 PALM AVE

SAN DIEGO, CA 92154

 (619) 591-9999

 (619) 591-9999

 Spanish, Vietnamese

 SU 10AM-6PM

M-F 9AM-8PM

SA 10AM-6PM

 *Accessibility:* CONTACT PROVIDER

 <https://www.southbayurgentcare.com/>

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