# Direktoryo ng Tagapagbigay



## Medi-Cal

**San Diego County | January 2025**

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Promise Health Plan

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## LANGUAGE ASSISTANCE NOTICE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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# A. Panimula

Salamat sa iyong pagpili sa Blue Shield of California Promise Health Plan. Inililista sa Direktoryong ito ang mga klinika, doktor, ospital, parmasya at iba pang uri ng mga tagapagbigay na bahagi ng Blue Shield of California Promise Health Plan.

Kapag ikaw ay sasali sa Blue Shield of California Promise Health Plan, mahalagang pumili ka nang isang manggagamot sa pangunahing pangangalaga (PCP) para sa bawat miyembro. Kung hindi ka pipili nang isa, pipili nang isa ang Blue shield Promise para sa iyo. Ang iyong PCP ang magiging doktor na pupuntahan mo para sa pangangalagang prebentibo at kung ikaw ay magkakasakit. Ipapadala ka ng iyong PCP sa isang espesyalistang manggagamot o iba pang espesyalistang tagapagbigay kapag kinakailangan. Ang PCP ay handang tumugon sa iyong mga pangangailangang healthcare at makikipagtulungan sa mga miyembro upang panatilihin silang malusog.

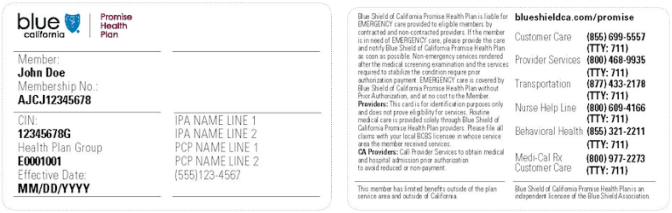
## Pagpapalit ng iyong PCP

Maaari mong palitan ang iyong PCP anumang oras sa pamamagitan ng pagtawag sa Customer Care ng Blue Shield Promise sa **(855) 699-5557** [TTY: **711**]. Ang mga pagpapalit ay hindi magiging epektibo hanggang sa unang araw ng susunod na buwan. Maaari mo ring bisitahin ang aming website sa **blueshieldca.com/promise**.

Bilang miyembro ng Blue Shield of California Promise Health Plan, makatatanggap ka ng ID card ng miyembro katulad ng nasa litrato sa pahinang ito. Kailangan mong ipakita ang ID card na ito sa tuwing makikipagkita ka sa iyong doktor, kukuha ng iyong mga reseta (mga medikasyon), gagamit ng emergency room, o makikipagkita sa iyong doktor sa mata. Dalhin ang card na ito sa lahat ng oras.

Kapag nakuha mo ang iyong ID card, mangyaring tiyakin na ito ay tama. Kung hindi, tawagan ang Customer Care ng Blue Shield of California Promise Health Plan sa **(855) 699-5557**.

Huwag itapon ang iyong Medi-Cal (BIC) card. Kakailanganin mong gamitin ang iyong card ng Medi-Cal (BIC) upang makipagkita sa iyong Medi-Cal na dentista at upang kumuha ng iba pang mga serbisyong healthcare na hindi sinasaklaw ng Blue Shield of California Promise Health Plan.




*ID Card ng Blue Shield (BIC)*

## Mga Serbisyong Parmasya mula sa Medi-Cal Rx

Ang Department of Health Care Services

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

(DHCS, Kagawaran ng mga Serbisyo sa Pangangalagang Pangkalusugan) namamahala ng mga serbisyo sa parmasya para sa mga miyembro ng Medi-Cal. Para sa Mga Serbisyo sa Parmasya, maaari kang tumawag sa Linya ng Sentro ng Ugnayan ng Medi-Cal Rx sa (1-800-977-2273) bente-kwatro oras sa isang araw, pitong araw sa isang lingo o sa 711 para sa TTY, Lunes hanggang Biyernes, 8am hanggang 5pm.

Karamihan sa mga parmasya ay tatanggap ng Medi-Cal Rx. Maaari kang maki-pagugnay sa Linya ng Tulong sa Miyembero ng Medi-Cal (1-800-541-5555, TTY 1-800-430-7077) upang tanungin kung tatanggap ang iyong parmasya ng Medi-Cal Rx. Kung kailangan mo ng tulong sa paghahanap ng isang parmasya, gamitin ang Tagahanap ng Parmasya ng Medi-Cal Rx sa online sa www.Medi-CalRx.dhcs.ca.gov o tumawag sa Linya ng Sentro ng Ugnayan ng Medi-Cal Rx sa 1-800-977-2273.

## Paano gamitin ang direktoryong ito

Maaari mong gamitin ang Direktoryo ng Tagapagbigay na ito upang pumili nang isang PCP na nakakontrata sa  Blue Shield Promise. Ang mga PCP, kasama ang mga tagapagbigay na espesyalista, ospital, at iba pang mga tagapagbigay ng suporta, ay inililista nang naka-alpabeto sa lungsod. Sa seksyon ng "network ng tagapagbigay ng Blue Shield Promise", mahahanap mo ang impormasyon tungkol sa kung paano basahin ang mga seksyon ng listahan ng tagapagbigay, at paano hanapin ang importanteng impormasyon na kailangan mo upang malaman ang tungkol sa bawat tagapagbigay.

## Mahalagang impormasyon tungkol sa mga listahan ng direktoryo

Ang Direktoryo ng Tagapagbigay na ito ay updated ayon sa petsang nakalista sa front cover. Ang ilang mga PCP ay maaaringdinagdag o tinanggal o tinanggal matapos ilimbag ang direktoryong ito. Hindi namin ginagarantiya na ang bawat PCP ay tumatanggap pa rin ng mga bagong miyembro. Para makakuha ng pinakabagong impormasyon tungkol sa mga PCP sa iyong lugar, maaari mong bisitahin ang blueshieldca.com/promise/medical o tawagan ang Customer Care ng Blue Shield Promise nang libre ang toll sa (855) 699-5557 [TTY: 711]. O bisitahin ang aming tanggapan Lunes hanggang Biyernes mula 8a.m. hanggang 6 p.m.

## Iba pang mahalagang impormasyon at mga pagsisiwalat

Ang ilang mga tagapagbigay at ospital ay hindi nag-aalok nang isa o higit pa sa mga sumusunod na serbisyo na maaaring saklaw ng iyong planong pangkalusugan na maaaring kailanganin mo, katulad ng pagpaplano ng pamilya; birth control, kabilang ang birth control na emergency; isterilisasyon, kabilang ang tubal ligation sa oras ng panganganak; paggamot sa pagkabaog; o pagpapalaglag. Tawagan ang

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

Customer Care ng Blue Shield Promise sa (855) 699-5557 upang matiyak na makukuha mo ang mga serbisyong healthcare na iyong kailangan.

Para sa karagdagang impormasyon tungkol sa aming mga tagapagbigay, kabilang ang kanilang edukasyon at karanasan (tulad ng mga paaralang medikal kung saan sila nagtapos, pagsasanay sa ospital, at katayuan ng sertipikasyon sa board), tawagan ang Customer Care ng Blue Shield Promise o gamitin ang search tool ng tagapagbigay sa aming website sa **blueshieldca.com/promise**.

Maaaring kailanganin ang awtorisasyon o mga referral upang ma-access ang ilang mga tagapagbigay.

Ang Blue Shield Promise ay nagbibigay nang buo at pantay na pag-access sa mga sinasaklaw na serbisyo, kabilang ang mga nakatala na may mga kapansanan. Ang lahat ng tagapagbigay ay inaalok at kinakailangang kumpletuhin ang pagsasanay sa Pangkulturang Kakayanan.

## Mga serbisyo ng tagasalin

Upang maging mas madali para sa iyo, ang Blue Shield Promise ay magbibigay ng:

- Mga tauhan na dalawa ang wika upang tulungan ka sa iyong wika.
- Mga serbisyo ng tagasalin, kabilang ang American Sign Language, nang libre sa iyo para sa lahat ng iyong pangangailangang healthcare. Hindi mo kailangang hilingin ang iyong mga kaibigan o mga kapamilya na magsalin para sa iyo. Maaari kang kumuha ng mga serbisyo ng tagasalin 24 na oras sa isang araw, pitong araw sa isang linggo para sa:
  - ✓ **Mga serbisyong medikal:** Mga pagbisita sa doktor, serbisyo pagkatapos ng oras ng trabaho, serbisyo sa agarang pangangalaga, serbisyo ng parmasya, at mga klase sa edukasyong pangkalusugan.
  - ✓ **Mga serbisyong hindi medikal:** Serbisyo sa customer, mga reklamo ng miyembro, at mga pagpupulong sa oryentasyon ng miyembro.
  - ✓ Mga materyales sa ibang format tulad ng Braille, audio, o malalaking letra.

Ang kailangan mo lamang gawin ay tawagan ang iyong grupong medikal o Customer Care ng Blue Shield Promise. Para sa mga naka-schedule na appointment, tiyaking humiling nang isang tagasalin nang hindi bababa sa sampung (10) araw ng trabaho bago ang iyong appointment.

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

blue california
Promise Health Plan

**ABISO NG HINDI PANDIDISKRIMINA**

Labag sa batas ang pandidiskrimina. Sumusunod ang Blue Shield of California Promise Health Plan sa mga batas ng Estado at Pederal na batas sa karapatang sibil. Ang Blue Shield of California Promise Health Plan ay hindi nandidiskrimina nang labag sa batas, nagsasantabi ng mga tao, o kaya naman ay nag-iiba ng pakikitungo sa kanila dahil sa kasarian, lahi, kulay, relihiyon, lipi, bansang pinagmulan, kinikilalang pangkat etniko, edad, kapansanan sa pag-iisip, kapansanan sa katawan, medikal na kundisyon, genetic na impormasyon, katayuan sa pag-aasawa, kinikilalang kasarian, o sekswal na oryentasyon.

Ang Blue Shield of California Promise Health Plan ay nagbibigay ng:

- Mga libreng tulong at serbisyo sa mga taong may mga kapansanan upang matulungan silang makipag-ugnayan nang mas maayos, tulad ng:
  - ✓ Mga kwalipikadong interpreter ng sign language
  - ✓ Nakasulat na impormasyon sa ibang format (malaking titik, audio, naa-access na electronic na format, iba pang format)
- Mga libreng serbisyo sa wika para sa mga taong hindi Ingles ang pangunahing wika, tulad ng:
  - ✓ Mga kwalipikadong interpreter
  - ✓ Impormasyong nakasulat sa ibang wika

Kung kailangan ninyo ang mga serbisyong ito, makipag-ugnayan sa Blue Shield of California Promise Health Plan sa pagitan ng 8 a.m. – 6 p.m., Lunes hanggang Biyernes. Tawagan ang Pangangalaga sa Customer sa inyong rehiyon:

**(800) 605-2556 (Los Angeles)**

**(855) 699-5557 (San Diego)**

Kung hindi kayo nakakarinig o nakakapagsalita nang maayos, mangyaring tumawag sa **TTY:711**. Kapag hiniling, maibibigay sa inyo ang dokumentong ito sa braille, malaking titik, audiocassette, o elektronic na form. Upang makakuha ng kopya sa isa sa mga alternatibong format na ito, mangyaring tumawag o sumulat sa:

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

## PAANO MAGHAIN NG KARAINGAN

Kung naniniwala kayong hindi naibigay ng Blue Shield of California Promise Health Plan ang mga serbisyong ito, o nandiskrimina ito nang labag sa batas sa ibang paraan batay sa kasarian, lahi, kulay, relihiyon, lipi, bansang pinagmulan, kinikilalang pangkat etniko, edad, kapansanan sa pag-iisip, kapansanan sa katawan, medikal na kundisyon, genetic na impormasyon, katayuan sa pag-aasawa, kinikilalang kasarian, o sekswal na oryentasyon, maaari kayong maghain ng karaingan sa Tagaayos ng Mga Karapatang Sibil ng Blue Shield of California Promise Health Plan. Maaari kayong maghain ng karaingan sa pamamagitan ng pagtawag sa telepono, pagsulat, sa personal, o electronic na paraan:

- Sa pamamagitan ng pagtawag sa telepono: Makipag-ugnayan sa Tagaayos ng Mga Karapatang Sibil ng Blue Shield of California Promise Health Plan sa pagitan ng 8 a.m. - 6 p.m., Lunes – Biyernes sa pamamagitan ng pagtawag sa (844) 883-2233. O kaya, kung hindi kayo nakakarinig o nakakapagsalita nang maayos, mangyaring tumawag sa TTY/TDD 711.
- Sa pamamagitan ng pagsulat: Magsagot ng form ng reklamo o magsulat ng liham at ipadala ito sa:
  Blue Shield of California Promise Health Plan Civil Rights Coordinator
  3840 Kilroy Airport Way, Long Beach, CA 90806
- Sa personal: Pumunta sa tanggapan ng inyong doktor o sa Blue Shield of California Promise Health Plan at sabihing gusto ninyong maghain ng karaingan.
- Sa electronic na paraan: Bisitahin ang website ng Blue Shield of California Promise Health sa www.blueshieldca.com/promise/medi-cal.

## OFFICE OF CIVIL RIGHTS – DEPARTMENT OF HEALTH CARE SERVICES NG CALIFORNIA (CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES)

Maaari din kayong maghain ng reklamo tungkol sa mga karapatang sibil sa Office of Civil Rights ng Department of Health and Human Services ng California sa pamamagitan ng pagtawag, pagsulat, o sa electronic na paraan:

- Sa pamamagitan ng pagtawag sa telepono: Tumawag sa **916-440-7370**. Kung hindi kayo nakakarinig o nakakapagsalita nang maayos, pakitawagan ang **711 (Telecommunications Relay Service)**.
- Sa pamamagitan ng pagsulat: Punan ang form ng reklamo o magpadala ng liham sa:
  **Deputy Director, Office of Civil Rights Department**
  **of Health Care Services**
  **P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413**
  Available ang mga form ng reklamo sa
  http://www.dhcs.ca.gov/Pages/Language_Access.aspx.
- Sa electronic na paraan: Magpadala ng email sa CivilRights@dhcs.ca.gov.

## OFFICE OF CIVIL RIGHTS – DEPARTMENT OF HEALTH AND HUMAN SERVICES NG U.S. (U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES)

Kung naniniwala kayong nadiskrimina kayo batay sa lahi, kulay, bansang pinagmulan, edad, kapansanan, o kasarian, maaari din kayong maghain ng reklamo tungkol sa mga karapatang sibil sa Office for Civil Rights ng Department of Health and Human Services ng U.S. sa pamamagitan ng pagtawag, pagsulat, o sa electronic na paraan:

- Sa pamamagitan ng pagtawag sa telepono: Tumawag sa **1-800-368-1019**. Kung hindi kayo

nakakarinig o nakakapagsalita nang maayos, pakitawagan ang **TTY/TDD 1-800-537-7697**.

- Sa pamamagitan ng pagsulat: Punan ang form ng reklamo o magpadala ng liham sa:

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

Available ang mga form ng reklamo sa http://www.hhs.gov/ocr/office/file/index.html.

Sa electronic na paraan: Bisitahin ang Complaint Portal ng Office for Civil Rights sa https://ocrportal.hhs.gov/ocr/portal/lobby.jsf.

# Tagapagbigay ng network ng Blue Shield Promise

## Mga kahulugan at pangkalahatang impormasyon

**Klinikang pang-komunidad:** Isang nonprofit na klinika na nagbibigay ng mga sebisyong healthcare sa mga miyembro ng Blue Shield Promise.

**Kasanayan sa Pamilya at Pangkalahatan**: Mga doktor na gumagamot ng mga bata at mga kalalakihan at kababaihan na nasa hustong gulang.

**Sentro ng Kalusugan na Kwalipikado sa Pederal (FQHC):** Isang organisasyon na nakabase sa komunidad na nagbibigay ng pangunahin at prebentibong pangangalaga sa mga tao anuman ang kanilang edad, anuman ang kanilang Kakayanang magbayad o katayuan ng insurance sa kalusugan.

**Ospital:** Ang Blue Shield Promise ay kumukontrata sa maraming ospital. I-tsek ang kaakibat na ospital ng manggagamot sa pangunahing pangangalaga na gusto mong piliin.

### Mga simbulo sa Direktoryo ng Provider

| | |
|---|---|
| * | Ang provider ay hindi tumatanggap ng mga bagong pasyente sa network ng kalusugang na ito |
| | Address ng tagapagbigay |
| ☎ | Numero ng telepono ng tagapagbigaya |
| | Numero ng telepono ng tagapagbigay pagkatapos ng oras ng trabaho |
| | Wikang ginagamit sa tanggapan ng tagapagbigay |
| | Mga oras ng tanggapan ng tagapagbigay |
| | Impormasyon sa pag-access |
| | Website ng tagapagbigay |

**Panloob na Gamot:** Mga doktor na gumagamot ng mga kalalakihan at kababaihan edad 18 pataas.

**Asosasyon ng Independienteng Pagsasanay (IPA)**: Isang modelo ng healthcare na kumokontrata sa grupo ng mga manggagamot upang magbigay ng mga serbisyong healthcare.

**Grupong medikal**: Isang grupo ng mga manggagamot na nagbibigay ng mga serbisyong healthcare sa mga miyembro ng Blue Shield Promise.

**Obstetrics/Gynecology**: Mga doktor na dalubhasa sa pangangalaga sa kalusugan at pagdadalangtao ng mga kababaihan.

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

**Pediatrics**: Mga doktor na gumagamot ng mga bata hanggang edad 18.

**Manggagamot sa Pangunahing Pangangalaga (PCP)**: Bilang isang miyembro ng Blue Shield Promise, kailangan mong pumili ng PCP para sa iyong pangkalahatang pangangailangan sa healthcare. Kung hindi ka pipili nang isa, pipili kami nang isa para sa iyo. Ang lahat ng PCP ay nakalista ayon sa lungsod. Maaari mong piliin ang sinuman sa mga sumusunod na doktor:

- Kasanayan sa Pamilya at Pangkalahatan
- Panloob na Gamot
- Obstetrics/Gynecology
- Pediatrics

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# Pisikal na tagapagturo ng pag-access sa Direktoryo ng Tagapagbigay

Makikita mo sa ibaba ang impormasyon sa pag-access ng mga pangunahing pangangailangan ng mga senior at taong may mga kapansanan (SPD) sa tuwing bumibisita sa tanggapan ng doktor. Alam namin na iba-iba ang mga pangangailangan ng miyembro. Samakatuwid, hinihiling namin

**E (Exam Room) = Silid ng Pagsusuri**
Ang pasukan sa silid ng pagsusuri ay madaling matunton, na may maliwanang na daan. Ang mga pintuan ay nakabukas nang sapat ang luwang upang maipasok ang isang wheelchair o scooter at madaling buksan. Ang silid ng pagsusuri ay may sapat na espasyo para sa wheelchair o scooter.

**EB (Exterior Building) = Labas ng Gusali**
Ang mga kurbang rampa at iba pang mga rampa patungo sa gusali ay sapat ang luwang para sa gumagamit ng wheelchair o scooter. Ang mga barandilya ay inilagay sa magkabilang panig ng rampa. May isang "madaling marating" na pasukan patungo sa gusali. Ang mga pintuan ay nakabukas nang sapat ang luwang upang makapasok ang gumagamit ng wheelchair o scooter, at may mga hawakan na madaling gamitin.

**IB (Interior Building) = Loob ng Gusali**
Ang mga pintuan ay nakabukas nang sapat ang luwang upang makapasok ang gumagamit ng wheelchair at scooter, at may mga hawakan na madaling gamitin. Ang mga panloob na rampa ay sapat ang luwang at may mga barandilya. Ang mga hagdan, kung mayroon, ay may mga barandilya. Kung may elevator, ito ay available para sa publiko at mga pasyente upang magamit anumang oras na bukas ang gusali. Ang elevator ay may mga tunog na madaling marinig at mga pindutang Braille na naaabot. Ang elevator ay may sapat na espasyo para makaikot ang wheelchair o scooter. Kung may platform lift, maaari itong gamitin nang walang tulong.

**P (Parking) = Paradahan**
Ang mga lugar ng paradahan, kabilang ang (mga) lugar na magagamit ng van, ay madaling marating. Ang mga daanan ay may mga kurbang rampa sa pagitan ng paradahan, sa tanggapan, at mga lugar ng babaan.

**R (Restroom) = Banyo**
Ang banyo ay magagamit at ang mga pinto ay madaling buksan at nakabukas nang sapat ang luwang upang maipasok ang wheelchair o scooter. Ang banyo ay may sapat na espasyo upang makaikot ang gumagamit ng wheelchair o scooter at maisara ang pinto. May mga barang mahahawakan upang mapadali ang paglipat mula sa wheelchair/scooter hanggang sa palikuran. Ang lababo ay madaling puntahan at ang mga gripo, sabon, at tisyu ay madaling abutin at gamitin.

**T (Exam Table/Scale) = Lamesa ng Pagsusuri/Timbangan**
Ang lamesa ng pagsusuri ay naigagalaw nang pataas at pababa, at ang timbangan ay magagamit nang may mga barandilya upang tulungan ang mga taong naka-wheelchair at scooter. Ang timbangan ay kayang magsakay nang isang wheelchair.

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.



# Mga paliwanag sa simbulo ng pag-access

| CODE | Explanation |
|---|---|
| P | **Paradahan** |
| EB | **Labas ng Gusali** |
| IB | **Loob ng Gusali** |
| W | **Wheelchair** |
| R | **Banyo** |
| E | **Silid ng Pagsusuri** |
| T | **Lamesa/Timbangan ng Pagsusuri** |

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

**Paano basahin ang listahan ng tagapagbigay**

**Ang sumusunod na impormasyon ay makatutulong sa iyo sa pagpili ng iyong PCP.**

1. Medikal na espesyalidad ng tagapagbigay
2. Pangalan ng tagapagbigay, Uri ng Lisensya
3. Numero ng ID ng tagapagbigay
4. Kasarian ng tagapagbigay
5. Numero ng lisensya ng tagapagbigay
6. Numero ng NPI ng tagapagbigay
7. Mga wikang ginagamit ng tagapagbigay at mga tauhan
8. Pagsasanay sa Pangkulturang Kakayanan
9. Mga kaakibat na ospital
10. Espesyalidad na Sinertipikahan ng Board:
11. Address ng tagapagbigay
12. Provider's after-hours phone number
13. Numero ng telepono ng tagapagbigay
14. Numero ng fax ng tagapagbigay
15. Website ng tagapagbigay
16. Email address ng tagapagbigay
17. Medi-Cal Open Panel:
18. Pinakamababa/Pinakamataas na edad:
19. Daanan ng gusali para sa taong may mga kapansanan
20. Oras ng tanggapan ng tagapagbigay

**Halimbawa:**

1. Pediatrics
2. Doe, Jane MD
3. ID ng Tagapagbigay: 00A2123456
4. Babae
5. Numero ng lisensya 00A123456
6. NPI: 0123456789
7. English, Spanish, Vietnamese, Farsi, Korean, Chinese, Arabic
8. Oo
9. Good Samaritan Hospital
10. Pediatrics
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. Oo/Hindi 18. 0-18
18. doctordoe@gmail.com
19. Limitado. P, EB, IB, E
20. Lunes - Biyernes 8AM-5PM

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# Napapanahong pag-access sa mga pamantayan ng pangangalaga

| Uri ng appointment | Dapat kumuha ng appointment sa loob ng |
|---|---|
| Mga appointment sa agarang pangangalaga na hindi nangangailangan ng paunang pag-apruba (paunang awtorisasyon) | 48 oras |
| Mga appointment sa agarang pangangalaga na nangangailangan ng paunang pag-apruba (paunang awtorisasyon) | 96 oras |
| Mga appointment sa pangunahingpangangalaga na hindi agaran | 10 araw ng trabaho |
| Espesyalista na hindi agaran | 15 araw ng trabaho |
| Tagapagbigay ng kalusugang pangkaisipan na hindi agaran (hindi manggagamot) | 10 araw ng trabaho |
| Appointment na hindi agaran sa mga serbisyong pantulong para sa pagsusuri o paggamot ng pinsala, karamdaman, o iba pang kondisyon ng kalusugan | 15 araw ng trabaho |
| Oras ng paghihintay sa telepono sa normal na oras ng trabaho | 10 minuto |
| Triage – mga serbisyong 24/7 | mga serbisyong 24/7 – hindi hihigit sa 30 minuto |

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa **blueshieldca.com/promise/medi-cal.** Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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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**
   **Lexxus 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. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**ALPINE**

**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-SA 9AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 9AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 9AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 9AM-5PM*

*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.mtnhealth.org*

## BORREGO SPRINGS

**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-SA 8AM-5PM*
*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*
*After Hours Phone: 760-767-5051*
*License Number: C39104*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: BORREGO COMMUNITY HEALTH 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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: A49273*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: PA53036*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

## CHULA VISTA

**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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: A163464*
*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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**CHULA VISTA PEDIATRICS**
*Provider ID: 482034*
855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353
*Phone: 619-662-4100*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 9AM-4PM*
*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: A82912*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-4PM*
*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-SA 9AM-4PM*
*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-SA 9AM-4PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

**OTAY FAMILY HEALTH CLINIC**
*Provider ID: 314546*
1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*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: 20A11087*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: 20A12555*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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: 20A14025*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: 20A19485*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: 20A9060*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A106103*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: A115699*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A120584*
*NPI: 1598122871*
*Accepting New Patients: Yes*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A120672*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A121861*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A123263*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A123492*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*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: A127706*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A134303*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*

*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: A162816*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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: A163183*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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: A164392*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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: A177922*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A40061*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A40473*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A41486*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A47906*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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:*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: A56153*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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: A87650*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A93785*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: C55563*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DC20760*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: DC31963*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DC33295*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DDS102880*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DPM2930*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G57243*
*NPI: 1598122871*
*Accepting New Patients: Yes*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G59670*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G72486*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G74728*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G80234*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*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: NP95015413*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: PA54404*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: SP18192*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Website: www.ihpsocal.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-SA 9AM-5PM*

*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: 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-SA 9AM-5PM*

*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: A113001*

*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-SA 9AM-5PM*

*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: 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-SA 9AM-5PM*

*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: A153344*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR SAN DIEGO-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: A144995*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR SAN DIEGO-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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR SAN DIEGO-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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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: 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-SA 9AM-5PM*

*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: 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-SA 9AM-5PM*

*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: 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-SA 9AM-5PM*

*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: 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-SA 9AM-5PM*

*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Hours: SU-SA 9AM-5PM*
*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*
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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

## EL CAJON

**LA MAESTRA CHC EL CAJON BROADWAY**
*Provider ID: 418501*
1032 BROADWAY
EL CAJON, CA 92021-7416
*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-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 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-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 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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-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-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: 619-515-2499*
*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-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*
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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: 619-269-1262*
*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-SA 9AM-5PM*
*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: 20A14222*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Hours: SU-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: A134303*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A138815*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A144974*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A146838*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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-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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**LA MAESTRA FAMILY CLINIC INC**
*Provider ID: 185267*
165 S 1ST ST
EL CAJON, CA 92019-4795
*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-SA 9AM-5PM*
*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: A68184*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Hours: SU-SA 9AM-5PM*
*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: PA58466*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 619-312-0348*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

**FAMILY HLTH CTR SAN DIEGO-EL CAJON**
*Provider ID: 418340*
525 E MAIN ST
EL CAJON, CA 92020-4007
*Phone: 619-515-2498*
*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-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: A164859*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-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: A178499*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A68463*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A72005*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A83390*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: C174771*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: DC33150*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: DC33869*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: DPM5661*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: G78814*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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-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-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-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: NP95007000*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: NP95009180*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: NP95009292*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: NP95013978*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: NP95021154*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: PA20396*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: PA23258*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: PT292482*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: PT295173*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: RN810863*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: 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-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: 20A11535*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: 20A13060*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: 20A13745*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: 20A14919*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: 20A7241*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A107093*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A108228*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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*

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 8AM-8PM*
*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-SA 8AM-8PM*
*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: A98486*
*NPI: 1134144165*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-8PM*
*American Sign Language (ASL):*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: G52812*

*NPI: 1134144165*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-8PM*

*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: NP95001710*

*NPI: 1134144165*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-8PM*

*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: 20A11733*

*NPI: 1134144165*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-8PM*

*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: A113241*

*NPI: 1134144165*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-8PM*

*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*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Hours: SU-SA 8AM-8PM*
*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-SA 8AM-8PM*
*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-SA 8AM-8PM*
*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*
*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-SA 8AM-8PM*
*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*
*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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION*
*Website: N/A*

**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: 20A13700*
*NPI: 1134155377*
*Accepting New Patients: Yes*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SAN YSIDRO HEALTH 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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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: 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-SA 8AM-5PM*

*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-SA 8AM-5PM*

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

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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: A47906*

*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-SA 8AM-5PM*

*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: A79338*

*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-SA 8AM-5PM*

*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: A87650*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A96002*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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: 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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: N/A*

**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-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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-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*

## 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-SA 8AM-5PM*
*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: DC29074*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: A103940*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*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*
*License Number: 80000638*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: G58033*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: NP95005999*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

**NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL**
*Provider ID: 206266*
425 N DATE ST
ESCONDIDO, CA
92025-3413
*Phone: 760-520-8340*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

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

**NEIGHBORHOOD HEALTHCARE PEDS 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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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*
*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-SA 8AM-5PM*
*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: 20A14292*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: A119661*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: A159727*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: A61751*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A78116*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A82173*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A94128*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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: DC12036*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*
*License Number: 80000397*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL):*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: A101773*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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: A161074*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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*

*Fax: 360-462-2749*

*After Hours Phone: 760-520-8200*

*NPI: 1598122871*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A56054*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A62467*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G61829*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP8169*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

**FALLBROOK**

**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-SA 8AM-5PM*
*American Sign Language (ASL): 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-SA 8AM-5PM*
*American Sign Language (ASL): 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: 760-451-4720*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Website: www.vistacommunityclinic.org*

## IMPERIAL BEACH

**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: 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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 9AM-5PM*

*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*

*NPI: 1134144165*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: BORREGO*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DC33688*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

## LEMON GROVE

**LEMON GROVE FAMILY HEALTH CENTER**
*Provider ID: 419139*
7592 BROADWAY
LEMON GROVE, CA 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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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-SA 9AM-5PM*
*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: A107323*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL):*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 9AM-5PM*

*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: A118095*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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: A148014*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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: A154298*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: A163464*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: A68463*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A72005*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 9AM-5PM*
*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: C174771*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: NP95009933*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: N/A*

**NATIONAL CITY**

**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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A103218*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A55469*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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*
*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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*
*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*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 9AM-5PM*
*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: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 185270*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
*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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*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: 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.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-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*

**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-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*

**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-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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

**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-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*

**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-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*

**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*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

**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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-6PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: 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-SA 8AM-6PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: 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-SA 8AM-6PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: 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*
*Hours: SU-SA 8AM-6PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-6PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: 80000240*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

**TRUECARE**
*Provider ID: 480315*
3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354
*Phone: 760-736-6767*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: 20A17371*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-5PM*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: Yes*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

**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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*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: 760-757-3004*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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 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-SA 8AM-5PM*
*American Sign Language (ASL):*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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 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-SA 8AM-5PM*

*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 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-SA 8AM-5PM*

*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 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-SA 8AM-5PM*

*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 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-SA 8AM-5PM*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommunityclinic.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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: NP95012681*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site Languages(s) Spoken: Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.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-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*License Number: 80000611*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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-SA 8AM-5PM*

*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*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

## SAN DIEGO

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**SAN YSIDRO HEALTH 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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10 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-SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10 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-SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10 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-SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10 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-SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsa*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*mahan.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*

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

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

9995 CARMEL MOUNTAIN RD STE B10 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-SA 8:30AM-5:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.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-SA 8AM-9PM*

*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: PT25155*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-9PM*

*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-9PM*
*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-SA 8AM-9PM*
*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-SA 8AM-9PM*
*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-SA 8AM-9PM*
*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-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: G16236*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-9PM*

*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: G80316*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-9PM*

*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: NP18098*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-9PM*

*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: NP7374*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-9PM*

*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: NP95001899*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.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: NP22974*
*NPI: 1801907449*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**

*Provider ID: 432308*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**

*Provider ID: 432308*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
*Phone: 844-200-2426*
*After Hours Phone: 844-200-2426*
*License Number: A71544*
*NPI: 1801907449*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**

*Provider ID: 432308*
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
*Phone: 844-200-2426*
*Fax: 858-536-8034*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**LA MAESTRA FAMILY CLINIC INC**

*Provider ID: 185268*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
*Phone: 619-798-3947*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: 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-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**
*Provider ID: 417101*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
*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-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**
*Provider ID: 417101*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
*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-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**
*Provider ID: 417101*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
*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:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Spanish, Tagalog*
*Cultural Competency: No*
*Hours: SU-SA 8AM-4:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.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-SA 8AM-9PM*
*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: 20A17657*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: 20A17702*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: 20A17926*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-9PM*
*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: A100333*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: A109633*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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-SA 8AM-9PM*
*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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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-SA 8AM-9PM*
*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: A154708*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: A169207*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: A171135*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-9PM*
*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: A180044*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: A70175*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: A80153*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: A80461*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: C52451*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: DC31024*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: DC33150*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: DC33688*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**OPERATION SAMAHAN - MIRA MESA**

*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-SA 8AM-4:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**

*Provider ID: 417101*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375

*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*

*Hours: SU-SA 8AM-4:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.org*

**OPERATION SAMAHAN - MIRA MESA**

*Provider ID: 432308*

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

*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-SA 8AM-4:30PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: OPERATION SAMAHAN*

*Website: www.operationsamahan.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-SA 8AM-5PM*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: A75533*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A82639*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: C55979*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G45632*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G87837*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP95013257*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*
*Website: www.lamaestra.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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*HEALTH CENTERS OF SAN DIEGO*
*Website: 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-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 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: NP95010814*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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 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-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 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-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 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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 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-SA 8AM-9PM*
*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: 20A11612*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: 20A12504*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: 20A14794*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-9PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: 20A14919*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 20A15743*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 20A17072*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 20A17478*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A103099*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**LA MAESTRA FAMILY CLINIC INC**
*Provider ID: 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-SA 8AM-5PM*
*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: PA21625*
*NPI: 1609849074*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: 619-280-7072*

*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-SA 8AM-5PM*

*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: 619-564-8765*

*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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: LA MAESTRA FAMILY CLINIC*

*Website: www.lamaestra.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-SA 9AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

3544 30TH ST
SAN DIEGO, CA 92104-4120

*Phone: 619-515-2424*

*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-SA 9AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

3544 30TH ST
SAN DIEGO, CA 92104-4120

*Phone: 619-515-2424*

*After Hours Phone: 619-515-2424*

*License Number: G78814*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 416831*
3514 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*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

3544 30TH ST
SAN DIEGO, CA 92104-4120

*Phone: 619-515-2424*

*After Hours Phone: 619-515-2424*

*License Number: 20A11535*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 206362*
3544 30TH ST
SAN DIEGO, CA 92104-4120
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: PA13752*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA15227*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA16245*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA17864*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA20396*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA21591*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA23258*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA53788*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: PA61677*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PT295463*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PT30272*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PT33914*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: RN486421*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: RN810863*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: SP27677*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**NORTH PARK FAMILY HEALTH CENTERS**
*Provider ID: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR 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-SA 8AM-9PM*
*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: PT292613*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: PT293536*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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: PT295173*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-9PM*
*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: PT40975*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*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*
*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-SA 8AM-9PM*
*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*
*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-SA 8AM-9PM*
*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*
*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-SA 8AM-9PM*
*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*
*Fax: 619-501-9645*
*After Hours Phone: 619-515-2545*
*License Number: A95356*
*NPI: 1134155377*
*Accepting New Patients: Yes*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-9PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.org*

**OPERATION SAMAHAN RANCHO PENASQUITOS**
*Provider ID: 418535*
9995 CARMEL MOUNTAIN RD STE B10 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: OPERATION SAMAHAN*
*Website: www.operationsamahan.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-SA 9AM-5PM*
*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: A114181*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: A116680*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A118095*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A120043*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A121451*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A122238*
*NPI: 1134155377*

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*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A136616*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A142703*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A146111*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A146838*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: A148014*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A151631*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A154298*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A160489*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A163183*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A163464*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A163978*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A164859*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: A169752*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A177373*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A177462*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A178499*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A181809*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A46161*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A61687*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A68124*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: A71671*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A72005*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A76785*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A77126*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A80504*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A93385*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A95577*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A97036*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: DPM4819*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: DPM5661*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: G78814*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NM792*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP10906*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP11778*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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: G81658*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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*
*Hours: SU-SA 9AM-5PM*
*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: NP95000205*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95000602*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95001705*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95003689*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95007253*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95011254*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95011313*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95015780*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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: A120447*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A120576*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

**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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Website: 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*

*Hours: SU-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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-SA 8AM-5PM*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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 Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

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

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Hours: SU-SA 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*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-SA 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ibclinic.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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*License Number: 20A8204*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A101017*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A125329*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

**KING CHAVEZ HEALTH CENTER**
*Provider ID: 451167*
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
*Phone: 619-662-4100*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*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*
*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-SA 8AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*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: A153414*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A157505*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A162332*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A78373*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*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: C55180*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DC33300*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.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: G29879*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: G71080*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: G72486*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-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: NP10769*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: yes*

*Cultural Competency: No*

*Hours: SU-SA 8AM-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-SA 8AM-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: A104052*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: yes*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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-SA 8AM-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: A42127*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: A54702*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: A60801*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER**
*Provider ID: 403583*
1501 IMPERIAL AVE

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: A67762*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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-SA 8AM-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: C53121*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: C174771*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*Phone: 619-515-2560*
*After Hours Phone: 619-515-2560*
*License Number: MT2061555*
*NPI: 1134155377*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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-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-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: A148014*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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-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-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: A164859*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A178499*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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: A72005*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A76785*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: C174771*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*
*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-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: NP95013978*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*
*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-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-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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: G78814*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: NM1662*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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 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-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 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: A128091*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**
*Provider ID: 402851*
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
*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-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: 20A11535*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: 20A13060*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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: A108228*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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: A113001*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR 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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR 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: NP95011254*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR 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: PA20888*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HLTH CTR 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*Provider ID: 233597*
4290 POLK AVE
SAN DIEGO, CA 92105-1524
*Phone: 619-563-0250*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A175116*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: DPM4434*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: G60630*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*Provider ID: 233532*
4305 UNIVERSITY AVE STE

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

150
SAN DIEGO, CA 92105-1690
*Phone: 619-280-2058*
*After Hours Phone: 619-280-2058*
*License Number: A152267*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.org*

**MID-CITY COMMUNITY CLINIC**
*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: A94449*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Website: www.sdfamilycare .org*

**MID-CITY COMMUNITY CLINIC**
*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*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare .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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*Phone: 619-515-2560*
*Fax: 619-263-2499*
*After Hours Phone: 619-515-2560*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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: 20A12402*
*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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A119010*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: yes*
*Site Languages(s) Spoken:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Lithuanian, Vietnamese, Spanish, Chinese*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A137415*
*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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*Site English Spoken: yes*
*Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK**
*Provider ID: 418142*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
*Phone: 619-515-2454*
*Fax: 619-794-2696*
*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-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 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-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 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-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 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-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 HEALTH CTR IBARRA**
*Provider ID: 417987*
4874 POLK AVE
SAN DIEGO, CA 92105-2026
*Phone: 619-515-2426*
*After Hours Phone: 619-515-2426*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*License Number: PA58905*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-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 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-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 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HEALTH CTR OF 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK**
*Provider ID: 418142*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
*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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*DIEGO*
*Website: 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-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 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-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 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-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 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

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

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
- *Website: 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-SA 8:30AM-5:30PM*

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

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
- *Website: 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: 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-SA 8:30AM-5:30PM*

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

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
- *Website: 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: 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-SA 8:30AM-5:30PM*

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

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
- *Website: 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,*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Chinese, Lithuanian*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A112176*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DOWNTOWN FAMILY CTR AT CONNECTIONS**
*Provider ID: 417782*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DOWNTOWN FAMILY CTR AT CONNECTIONS**
*Provider ID: 417782*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DOWNTOWN FAMILY CTR AT CONNECTIONS**
*Provider ID: 417782*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
*Phone: 619-515-2430*
*Fax: 619-578-2410*
*After Hours Phone: 619-515-2430*
*NPI: 1134155377*
*Accepting New Patients: Yes*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DOWNTOWN FAMILY CTR AT CONNECTIONS**
*Provider ID: 417782*
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**FAMILY HEALTH CTR 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-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 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-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 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-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-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 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-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 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-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 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-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: yes*
*Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.sdfamilycare.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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*Phone: 619-515-2420*
*After Hours Phone: 619-515-2420*
*License Number: A154298*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*Phone: 619-515-2560*
*After Hours Phone: 619-515-2560*
*License Number: A140912*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

**DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**
*Provider ID: 206363*
4725 MARKET ST
SAN DIEGO, CA 92102-4715
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

## SAN MARCOS

**TRUECARE**
*Provider ID: 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*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 20A17306*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site Languages(s) Spoken: Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A48980*
*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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 760-736-6767*
*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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

**TRUECARE**
*Provider ID: 614511*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: C54157*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 760-736-6767*
*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-SA 9AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: 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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: 760-736-6767*
*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-SA 9AM-5PM*
*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*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Website: 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-SA 8AM-5PM*

*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: G74757*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Cultural Competency: No*

*Hours: SU-SA 9AM-5PM*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Hours: SU-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: 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-SA 8AM-5PM*
*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: NP95003903*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

## SAN YSIDRO

**SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

*Provider ID: 227469*
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: 619-600-4870*
*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-SA 8AM-5PM*
*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: A113624*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*
*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-SA 8AM-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*
*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 Languages(s) Spoken: Spanish, Tagalog, Portuguese*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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*
*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-SA 8AM-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*
*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-SA 8AM-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*
*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-SA 8AM-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*
*Fax: 619-205-6341*
*After Hours Phone: 619-662-4100*
*License Number: A164201*
*NPI: 1598122871*
*Accepting New Patients: Yes*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: A40473*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A167529*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A32571*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A120584*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: A153975*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: A164201*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: 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-SA 8AM-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: 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-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: A93785*
*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-SA 8AM-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*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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-SA 8AM-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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: A175006*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Yes*
- *Site Languages(s) Spoken:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Spanish, Tagalog, Portuguese*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: A177337*
*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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-5:30PM*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-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: 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-SA 8AM-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: A77936*
*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-SA 8AM-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: 619-205-6341*
*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 Languages(s) Spoken: Spanish, Tagalog, Portuguese*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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: 619-428-4463*
*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-SA 8AM-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: 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-SA 8AM-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: 20A11153*
*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-SA 8AM-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: 20A12653*
*NPI: 1598122871*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 20A9907*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
- *Site English Spoken: Yes*
- *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Cultural Competency: No*
*Hours: SU-SA 8AM-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: 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-SA 8AM-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: A101827*
*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-SA 8AM-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-SA 8AM-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-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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: 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-SA 8AM-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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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*
*Cultural Competency: No*
*Hours: SU-SA 8AM-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-SA 8AM-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-SA 8AM-5:30PM*
*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: G51462*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5PM*
*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: 619-205-6305*
*After Hours Phone: 619-662-4100*
*NPI: 1598122871*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*After Hours Phone: 619-662-4100*
*License Number: C149818*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8:30AM-5PM*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*After Hours Phone: 619-662-4100*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*License Number: A138938*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*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*
*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-SA 8:30AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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: 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-SA 8AM-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: G80107*
*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-SA 8AM-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: 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-SA 8AM-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: NP12112*
*NPI: 1598122871*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-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: NP95019995*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP95017732*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP95003721*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP95004315*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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-SA 8AM-5PM*
*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: C42207*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: DPM2930*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: G66745*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP12112*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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: NP95003671*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

SAN YSIDRO, CA 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-SA 8AM-5:30PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A149063*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A154298*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A163464*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A164859*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A169342*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A178499*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A55932*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A68463*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: G78814*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP10943*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: NP95013978*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: PA54588*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

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# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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*
*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-SA 9AM-5PM*
*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: 20A14919*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 20A15459*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A108228*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 9AM-5PM*
*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: A114181*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A116680*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: A148014*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*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: 20A11535*
*NPI: 1134155377*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: 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-SA 9AM-5PM*
*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 VALLEY, CA 91977-4035
*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-SA 9AM-5PM*
*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 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-SA 9AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*
*Website: www.fhcsd.org*

## VISTA

**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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommu*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*nityclinic.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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommunityclinic.org*

**VISTA COMMUNITY CLINIC**
*Provider ID: 206338*
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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Site English Spoken: Yes*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommunityclinic.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: A80635*
*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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: C143703*
*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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: C162072*
*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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: C171929*
*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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommunityclinic.org*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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:*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommunityclinic.org*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

**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*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Site Languages(s) Spoken: Spanish*
*Cultural Competency: No*
*Hours: SU-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: 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-SA 8AM-8PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: www.vistacommunityclinic.org*

**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-SA 8:30AM-5PM*
*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-SA 8:30AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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-SA 8AM-5PM*
*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: 80000328*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8:30AM-5PM*
*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-SA 8AM-5PM*
*American Sign Language (ASL): N*

# B. Mga Pederal na Kwalipikadong Klinikang Pangkalusugan

*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-SA 8AM-5PM*
*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: RN410247*
*NPI: 1598122871*
*Accepting New Patients: Yes*
*Min/Max Age: 0\None*
*Site English Spoken: Yes*
*Cultural Competency: No*
*Hours: SU-SA 8AM-5PM*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

## ALPINE

### CERTIFIED NURSE PRACTITIONER

**KAHL, NICHOLAS**

*Provider ID: 517802*
*Provider Gender: Male*
*License Number: NP95006360*
*NPI: 1821306598*
*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*

### CERTIFIED NURSE PRACTITIONER

**SANDERS, JESSICA**

*Provider ID: 517802*
*Provider Gender: Female*
*License Number: NP23004*
*NPI: 1760765333*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE PRACTITIONER

**TODD, MIKAYLA**

*Provider ID: 517802*
*Provider Gender: Female*
*License Number: NP95005999*
*NPI: 1316478092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CHIROPRACTOR

**ABDULRAHIM, AHMED**

*Provider ID: 517802*
*Provider Gender: Male*
*License Number: DC28335*
*NPI: 1619040292*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Burmese, Gujarati, Hindi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CHIROPRACTOR

**KELCHNER, MATTHEW**

*Provider ID: 517802*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider Gender: Male*
*License Number: DC22733*
*NPI: 1174656755*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.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*
*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: 517802*
*Provider Gender: Male*
*License Number: A158569*
*NPI: 1659638062*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Danish, French, Norwegian, Swedish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.mtnhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**STENSMAN, LARS**
*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*

**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*
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, Persian, 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: 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**

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

**FAMILY PRACTICE**

**CORONADO, MYRNA**
*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*
*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*
*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*
*After Hours Phone: (619) 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*
*Website: www.syhealth.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*
*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*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*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) 736-8740*

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

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PEDIATRICS**

**BURGAMY, ELIZABETH**

*Provider ID: 326275*

*Provider Gender: Female*

*NPI: 1164609558*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009

*Phone: (760) 633-3640*

*Fax: (760) 633-3644*

*After Hours Phone: (760) 633-3640*

*Website: N/A*

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

**PEDIATRICS**

**IYENGAR, RADHA**
*Provider ID: 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3257 CAMINO DE LOS COCHES STE 202
CARLSBAD, CA 92009
*Phone: (760) 633-3640*
*Fax: (760) 633-3644*
*After Hours Phone: (760) 633-3640*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**OCONNOR, 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
CARLSBAD, CA 92009
*Phone: (760) 633-3640*
*Fax: (760) 633-3644*
*After Hours Phone: (760) 633-3640*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## CHULA VISTA

### CERTIFIED NURSE PRACTITIONER

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

### CERTIFIED NURSE PRACTITIONER

**IBARRA, MARTHA**
*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 /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

**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*
*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*
*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*
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*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*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*
*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*
*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
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CHIROPRACTOR**

**KAZEM, HARON**
*Provider ID: 427322*
*Provider Gender: Male*
*License Number: DC33295*
*NPI: 1306221262*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org/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*
*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*
*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*
*Website: 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*
*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*
*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)*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**FAMILY PRACTICE**

**CHERY, FARAH**
*Provider ID: 206355*
*Provider Gender: Female*
*License Number: A108681*
*NPI: 1114183688*

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

**FAMILY PRACTICE**

**CHERY, FARAH**
*Provider ID: 417641*
*Provider Gender: Female*
*License Number: A108681*
*NPI: 1114183688*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
352 L ST
CHULA VISTA, CA 91911
*Phone: (619) 515-2325*
*After Hours Phone: (619) 515-2325*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

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

**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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**JIMENEZ, KRYSTAL**
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*IHP OF 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*
*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*
*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*
*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*
*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*
*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*
*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*
*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*
*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*
*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- medical- 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- 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**

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

**FAMILY PRACTICE**

**PEREZ, PERLITA**
*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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- 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**

**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*
*Provider Language(s) Spoken: Czech*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org /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**

**RAJ, ASHA**
*Provider ID: 417641*
*Provider Gender: Female*
*License Number: 20A15683*
*NPI: 1003293507*
*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) 515-2500*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

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

**FAMILY PRACTICE**

**ROSENBLATT, EUGENE**

*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*

*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*

*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*

*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*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**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- 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- 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- 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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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*
*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*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**FQHC**

**FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,**
*Provider ID: 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*
*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*
*Medi-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*
*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**
*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*
*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*
*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 /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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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- 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**

**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- 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**

**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- medical- 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
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,**

# C. Direktoryo ng Pangunahing Pangangalaga

**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- medical- 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- 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*

**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*

*Medi-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*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

**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*
*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*
*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*
*Medi-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
*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**

**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: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

678 3RD AVE
CHULA VISTA, CA 91910

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

**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*

*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: 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- medical- 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*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*Provider ID: 206355*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**PAPASTERGIOU, GEORGIOS**
*Provider ID: 427322*
*Provider Gender: Male*

# C. Direktoryo ng Pangunahing Pangangalaga

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

# C. Direktoryo ng Pangunahing Pangangalaga

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

# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*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*

*NPI: 1013005636*

- *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA,*

# C. Direktoryo ng Pangunahing Pangangalaga

*SHARP CHULA VISTA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

865 3RD AVE STE 101
CHULA VISTA, CA 91911

*Phone: (619) 426-7910*

*Fax: (619) 426-2337*

*After Hours Phone: (619) 426-7910*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

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

*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-12PM*

## 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 107
CHULA VISTA, CA 91915

*Phone: (619) 482-1700*

*Fax: (619) 475-4578*

*After Hours Phone: (619) 482-1700*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**GHAHREMANI, SIMIN**

*Provider ID: 664445*
*Provider Gender: Female*
*License Number: C51110*
*NPI: 1508904657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**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*

**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, SHARP CORONADO HOSP AND HEALTHCARE CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 426-2170*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**JACOBS-KLEISLI, MILAGROS**
*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
CHULA VISTA, CA 91911
*Phone: (619) 482-3090*
*Fax: (619) 482-7350*
*After Hours Phone: (619) 482-3090*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**PEDIATRICS**

**KORSAND, SID**
*Provider ID: 664445*
*Provider Gender: Male*
*License Number: A49591*
*NPI: 1588634513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**KORSAND, SID**
*Provider ID: 634788*
*Provider Gender: Male*
*NPI: 1588634513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**MCMAHON, SHARON**
*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-12PM*

**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*
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*
*Provider Language(s) Spoken: Spanish*
*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*
*Provider Language(s) Spoken: Spanish*
*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*
*Provider Language(s)*

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

**PEDIATRICS**

**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- medical- 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*
*Provider Language(s) Spoken: Persian*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

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

# C. Direktoryo ng Pangunahing Pangangalaga

**PEDIATRICS**

**SANTIAGO, ROXANE**

*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*

**PEDIATRICS**

**SHETH, HASMUKH**

*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- medical- plaza*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**VALENCIA, MARILES**

*Provider ID: 104059*

*Provider Gender: Female*

*NPI: 1275541625*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

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

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915

*Phone: (619) 482-1700*

*Fax: (619) 475-4578*

*After Hours Phone: (619) 482-1700*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PEDIATRICS**

**YAO, CATHERINE**

*Provider ID: 371204*

*Provider Gender: Female*

*NPI: 1801166442*

*Provider English Spoken: Y*

*Cultural Competency: N*

# C. Direktoryo ng Pangunahing Pangangalaga

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

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PHYSICIANS ASSISTANT**

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

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

**PODIATRIST**

# C. Direktoryo ng Pangunahing Pangangalaga

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

**REGISTERED PHYSICAL THERAPIST**

**AVILES, LEAH**
*Provider ID: 206355*
*Provider Gender: Female*
*License Number: PT298792*
*NPI: 1548867419*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*NPI: 1548714652*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
251 LANDIS AVE
CHULA VISTA, CA 91910
*Phone: (619) 515-2500*
*After Hours Phone: (619) 515-2500*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**REGISTERED PHYSICAL THERAPIST**

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

**RHEUMATOLOGY**

**REDDY, DANA**
*Provider ID: 427322*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR,*

*SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
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*
*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*
*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- 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*

**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*
*Medi-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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**CERTIFIED NURSE PRACTITIONER**

**HAMID, WAHIDA**
*Provider ID: 569910*
*Provider Gender: Female*
*License Number: NP95001707*
*NPI: 1164812293*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*

**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**

**LEONARD, BEVERLY**
*Provider ID: 206354*
*Provider Gender: Female*
*License Number: NP10943*
*NPI: 1285772392*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*

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

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**MANGENE, CYNTHIA**
*Provider ID: 206354*
*Provider Gender: Female*
*License Number: NP6782*
*NPI: 1548292626*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*Provider ID: 418501*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*Provider ID: 185267*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*

# C. Direktoryo ng Pangunahing Pangangalaga

165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
*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
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**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*

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**
*Provider ID: 185267*
*Provider Gender: Female*
*License Number: NP17328*
*NPI: 1548450471*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Catalan, German, Spanish*
*Cultural Competency: N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**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) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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: RN428876*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

**SWAN, MELANIE**
*Provider ID: 206354*
*Provider Gender: Female*
*License Number: NP95000818*
*NPI: 1871934414*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VERDUZCO GONZALEZ, AURORA**
*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*
*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) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*Provider ID: 185267*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

## CERTIFIED NURSE PRACTITIONER

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

## 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*
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5983*
*After Hours Phone: (619) 795-5983*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

## CHIROPRACTOR

**SOSA, DAVID**
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**CHIROPRACTOR**

**SOSA, DAVID**
*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**

**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*
*Provider Language(s) Spoken: Bengali, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (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**
*Provider ID: 418340*
*Provider Gender: Female*
*License Number: A146838*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

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

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

**FAMILY PRACTICE**

**BROWN, BRANDON**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BRUHN, JOSHUA**
*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*
*Medi-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*
*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**

**GHAFARI, DAUOD**

*Provider ID: 478971*
*Provider Gender: Male*
*License Number: A98486*
*NPI: 1053417691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*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*

**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*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

# C. Direktoryo ng Pangunahing Pangangalaga

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

**FAMILY PRACTICE**

**MANDOYAN, AUSTIN**
*Provider ID: 418340*
*Provider Gender: Female*
*License Number: A161682*
*NPI: 1841726148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-5PM*

**FAMILY PRACTICE**

**NASSIR, BASSAM**
*Provider ID: 569910*
*Provider Gender: Male*
*License Number: A101888*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*NPI: 1386848166*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FAMILY PRACTICE**

**NIAZI, HARRIS**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: A146111*
*NPI: 1174905871*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM*

**FAMILY PRACTICE**

**PUTRUS, RAMIZ**
*Provider ID: 185267*
*Provider Gender: Male*
*License Number: A68184*
*NPI: 1144300534*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PUTRUS, RAMIZ**
*Provider ID: 664824*
*Provider Gender: Male*
*License Number: A68184*
*NPI: 1144300534*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
181 REA AVE
EL CAJON, CA 92020
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RODRIGUEZ, LOUIE**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: A176144*
*NPI: 1558823625*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*

# C. Direktoryo ng Pangunahing Pangangalaga

*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

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

**FAMILY PRACTICE**

**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*
*Medi-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*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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):*

*N*

*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*

*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*

*Medi-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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**LA MAESTRA CHC-REA AVE,**

*Provider ID: 664824*

*NPI: 1609849074*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

181 REA AVE
EL CAJON, CA 92020

*Phone: (619) 312-0347*

*Fax: (619) 510-4649*

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

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**

*Provider ID: 185267*

*NPI: 1336353721*

*Provider English Spoken: Y*

*Cultural Competency: N*

*LA MAESTRA FAMILY CLINIC*

165 S 1ST ST

# C. Direktoryo ng Pangunahing Pangangalaga

EL CAJON, CA 92019
*Phone: (619) 312-0347*
*Fax: (619) 749-5480*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*

**FQHC**

**SAN YSIDRO HEALTH EL CAJON,**
*Provider ID: 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*
*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*
*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 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*

**INTERNAL MEDICINE**

**ALWASH, MUSTAFA**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: A160516*
*NPI: 1679936439*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**INTERNAL MEDICINE**

**AWDISHO, ALAN**
*Provider ID: 569910*
*Provider Gender: Male*
*License Number: 20A18702*
*NPI: 1164795498*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Assyrian, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**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*
*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*
*Medi-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*
*Medi-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) 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*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

875 EL CAJON BLVD
EL CAJON, CA 92020

*Phone: (619) 662-4100*

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

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**MAY, LOUIS**

*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**INTERNAL MEDICINE**

**NADI, FAHIMA**
*Provider ID: 418340*
*Provider Gender: Female*
*License Number: A175325*
*NPI: 1770072290*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Pashto, Persian, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

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

**INTERNAL MEDICINE**

**PETITT, 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*

**INTERNAL MEDICINE**

**REDDY, ARJUN**
*Provider ID: 428134*
*Provider Gender: Male*
*NPI: 1730132457*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5442 SYCUAN RD
EL CAJON, CA 92019
*Phone: (619) 445-0707*
*Fax: (619) 445-0988*
*After Hours Phone: (619) 445-0707*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4PM*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*Provider ID: 185267*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 269-1262*
*After Hours Phone: (619) 269-1262*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM TH-F 8AM-5PM*

**INTERNAL MEDICINE**

**ROUEL, LINDA**
*Provider ID: 308485*
*Provider Gender: Female*
*NPI: 1326128950*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Mandarin, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD*
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*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-7PM*

# C. Direktoryo ng Pangunahing Pangangalaga

**INTERNAL MEDICINE**

**ROUEL, WADI**

*Provider ID: 418501*

*Provider Gender: Male*

*License Number: C55979*

*NPI: 1740254713*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

1032 BROADWAY
EL CAJON, CA 92021

- *Phone: (619) 795-5983*
- *After Hours Phone: (619) 795-5983*
- *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

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

**INTERNAL MEDICINE**

**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*

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**YOON, TAE**

*Provider ID: 418340*

*Provider Gender: Male*

*License Number: C161090*

*NPI: 1508918178*

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

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

525 E MAIN ST
EL CAJON, CA 92020

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

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

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

**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, German, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*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**

**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*
*Medi-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 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*
*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*
*Medi-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*
*Medi-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**
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

**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*
*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*
*Medi-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*
*Medi-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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**PAPA, RHETT**

*Provider ID: 478971*
*Provider Gender: Male*
*License Number: 20A11733*
*NPI: 1063642312*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*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**

**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*
*Medi-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**

*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**OPHTHALMOLOGY**

**ALBORZIAN, SHERVIN**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: A107093*
*NPI: 1588825129*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, 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
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*

**OPHTHALMOLOGY**

**JARDON, JAVIER**
*Provider ID: 569910*
*Provider Gender: Male*
*License Number: A131365*
*NPI: 1609171982*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

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

**OPHTHALMOLOGY**

**PAPASTERGIOU, GEORGIOS**
*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*
*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*
*Provider Gender: Male*
*License Number: A87650*
*NPI: 1376723759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

# C. Direktoryo ng Pangunahing Pangangalaga

*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, French, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## PEDIATRICS

**ALWAHAB, AREEJ**
*Provider ID: 678064*
*Provider Gender: Female*
*NPI: 1497138002*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: ST BERNARDINE MED CTR, KAISER FOUNDATION HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
250 E CHASE AVE STE 110
EL CAJON, CA 92020
*Phone: (619) 399-7878*
*Fax: (858) 499-5006*
*After Hours Phone: (619) 399-7878*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

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

**PEDIATRICS**

**CONE, STEPHANIE**
*Provider ID: 418501*
*Provider Gender: Female*
*License Number: A123929*
*NPI: 1437444858*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
1032 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 795-5991*
*After Hours Phone: (619) 795-5991*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**FIGUEROA RODRIGUEZ, BRENDA**
*Provider ID: 478971*
*Provider Gender: Female*
*License Number: A114674*
*NPI: 1134205214*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*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*

**PEDIATRICS**

**FLEMING, TARA**
*Provider ID: 418340*
*Provider Gender: Female*
*License Number: A152462*
*NPI: 1972965242*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

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

**PEDIATRICS**

**HOANG, VY**
*Provider ID: 546310*
*Provider Gender: Female*
*NPI: 1649575135*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
844 JACKMAN ST
EL CAJON, CA 92020
*Phone: (619) 442-2560*
*Fax: (619) 442-7836*
*After Hours Phone: (619) 442-2560*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**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.org*
*Medi-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*

# C. Direktoryo ng Pangunahing Pangangalaga

*CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 312-0347*
*After Hours Phone: (619) 312-0347*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**PEDIATRICS**

**KODSI, ALICIA**
*Provider ID: 418340*
*Provider Gender: Female*
*License Number: A147976*
*NPI: 1932514353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*Provider Gender: Female*
*NPI: 1477663722*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
844 JACKMAN ST
EL CAJON, CA 92020
*Phone: (619) 442-2560*
*Fax: (619) 442-7836*
*After Hours Phone: (619) 442-2560*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RODRIGUEZ, ALDO**
*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*

**PHYSICIANS ASSISTANT**

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

**PHYSICIANS ASSISTANT**

**ALYAS, ALISIA**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**
*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**

**CONDEZ, EDSEL**
*Provider ID: 418340*
*Provider Gender: Male*
*License Number: PA53129*
*NPI: 1073978680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*
*SA 8:30AM-5:30PM*

**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**

**PATEL, SHREYA**
*Provider ID: 206354*
*Provider Gender: Female*
*License Number: PA18719*
*NPI: 1447468137*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ROSENBLATT, SHERILYN**
*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, ERIC**
*Provider ID: 206354*
*Provider Gender: Male*
*License Number: PA55067*
*NPI: 1669756128*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1111 W CHASE AVE
EL CAJON, CA 92020
*Phone: (619) 515-2499*
*After Hours Phone: (619) 515-2499*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**TURNER, SHEREENA**
*Provider ID: 418340*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

525 E MAIN ST
EL CAJON, CA 92020
*Phone: (619) 515-2498*
*After Hours Phone: (619) 515-2498*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**ZAMBRANA, GEORGE**
*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*
*Medi-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 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**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
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

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

**REGISTERED PHYSICAL THERAPIST**

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

## ENCINITAS

**PEDIATRICS**

**BRION, SONJA**
*Provider ID: 386639*
*Provider Gender: Female*
*NPI: 1306817317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
499 N EL CAMINO REAL
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**

**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*

## 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*
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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**ROBINSON, DEAN**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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-12PM*

**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-12PM*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*Provider ID: 206270*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*

# C. Direktoryo ng Pangunahing Pangangalaga

*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**CASTANER, ZALYA**
*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**

**FERRAIOLO, NATALIE**
*Provider ID: 206270*
*Provider Gender: Female*
*License Number: A152372*
*NPI: 1306290143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**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, Punjabi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**FAMILY PRACTICE**

**LAI, AMARA**
*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**

**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-12PM*

**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-12PM*

**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*

**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**

**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
ESCONDIDO, CA 92025

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*IHP OF SOUTHERN CAL-PHP*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

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*
*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*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**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*
*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-12PM*
*M-F 8AM-8PM*
*SA 8AM-12PM*

**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*

**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 PEDS 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**

# C. Direktoryo ng Pangunahing Pangangalaga

**PARKWAY,**
*Provider ID: 206271*
*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*
*Hours: M-F 8AM-5PM*

**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: 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-12PM*

**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
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**INTERNAL MEDICINE**

**VETTICADEN, SANTOSH**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**AGUILAR, EDITA**
*Provider ID: 424775*
*Provider Gender: Female*
*License Number: A56054*
*NPI: 1467407411*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**AGUILAR, EDITA**
*Provider ID: 206266*
*Provider Gender: Female*
*License Number: A56054*
*NPI: 1467407411*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*After Hours Phone: (760) 520-8340*
*Website: www.ihpsocal.org*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): 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*

**PEDIATRICS**

**CHOW, BYRON**
*Provider ID: 206270*
*Provider Gender: Male*
*License Number: A78116*
*NPI: 1619907607*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**COHEN, CARA**
*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*

**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*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 746-2641*
*Fax: (760) 740-2178*
*After Hours Phone: (760) 746-2641*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8:30AM-12PM*

**PEDIATRICS**

**CURET, ZULMA**
*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: 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**

**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**

**IBRAHIM, MAGED**
*Provider ID: 419344*
*Provider Gender: Male*
*License Number: C141296*
*NPI: 1306852934*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP*
*Board Certified Specialty: No*
*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-12PM*
*M-F 8AM-8PM*
*SA 8AM-12PM*

**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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*After Hours Phone: (760) 520-8100*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**TELLECHEA-SANCHEZ, SELMIRA**

*Provider ID: 424775*
*Provider Gender: Female*
*License Number: G83438*
*NPI: 1730288747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
426 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 690-5900*
*After Hours Phone: (760) 690-5900*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**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-12PM*
*M-F 8AM-8PM*
*SA 8AM-12PM*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**PHYSICIANS ASSISTANT**

**SHARPE, NORMA**
*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*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*Provider ID: 624122*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

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

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*Provider ID: 624122*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM TU 8AM-12:30PM W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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*
*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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*Provider ID: 624122*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*Provider ID: 624122*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**KIRKLAND, STEPHANIE**
*Provider ID: 624122*
*Provider Gender: Female*
*License Number: NP95013844*
*NPI: 1083813661*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHRISTUS SANTA ROSA MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*Provider ID: 624122*
*Provider Gender: Male*
*License Number: NP95015717*
*NPI: 1801497284*
*Provider English Spoken: Y*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*Provider ID: 624122*
*Provider Gender: Male*
*License Number: NP95015717*
*NPI: 1801497284*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*W-TH 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**RACKHAM, KELLY**
*Provider ID: 624122*
*Provider Gender: Male*
*License Number: NP95015717*
*NPI: 1801497284*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
321 E ALVARADO ST
FALLBROOK, CA 92028
*Phone: (760) 723-6200*
*After Hours Phone: (760) 723-6200*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-12:30PM*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4PM*
*TU 8AM-5PM*
*W-TH 8AM-4PM*

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

**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
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-5PM*
*W-TH 8AM-4PM*

**PEDIATRICS**

**CLAPP, MEGAN**
*Provider ID: 686664*
*Provider Gender: Female*
*NPI: 1699399337*
*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) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*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-F 8AM-5PM*

**PEDIATRICS**

**DELRE, 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**

**LINARES, YENDI**
*Provider ID: 538068*
*Provider Gender: Female*
*NPI: 1336674886*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
1107 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-0070*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Fax: (760) 451-1499*
*After Hours Phone: (760) 451-0070*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**ROBINSON, DAISY**
*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*

## 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*
*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*
*Provider Language(s) Spoken: Serbian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## JULIAN

**CLINIC OUTPATIENT**

**SAN YSIDRO HEALTH JULIAN FAMILY MEDICINE,**
*Provider ID: 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*
*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-12PM*

### 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 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**

**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*
*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: 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*

**CERTIFIED NURSE PRACTITIONER**

**WARD, KATHERINE**
*Provider ID: 613887*
*Provider Gender: Female*
*NPI: 1477223576*
*Provider English Spoken: Y*
*Cultural Competency: N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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: 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*

## FAMILY PRACTICE

**PATEL, HEMANSHU**
*Provider ID: 664660*
*Provider Gender: Male*
*NPI: 1255777439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: BARSTOW COMMUNITY HOSPITAL, DESERT VALLEY HOSPITAL, Providence St Mary Medical Center, VICTOR VALLEY GLOBAL MED CTR*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
7339 EL CAJON BLVD STE I
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*Provider Language(s) Spoken: Spanish*
*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
*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 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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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**

**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**

**IMUS, PAUL**
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942
*Phone: (619) 698-2184*
*Fax: (619) 698-2084*
*After Hours Phone: (619) 698-2184*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**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
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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### FAMILY PRACTICE

**LIU-BARBARO, DOROTHY**
*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*

## 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: NP15444*
*NPI: 1780603597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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: 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**

**TOTH, JESSICA**
*Provider ID: 419139*
*Provider Gender: Female*
*License Number: NP95001050*
*NPI: 1578993788*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*Provider ID: 419139*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**DORN, TIA**
*Provider ID: 419139*
*Provider Gender: Female*
*License Number: C172318*
*NPI: 1285074740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**FAMILY PRACTICE**

**KIM, YUHEE**
*Provider ID: 419139*
*Provider Gender: Female*
*License Number: A107323*
*NPI: 1629289400*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**LEMON GROVE FAMILY HEALTH CENTER,**
*Provider ID: 419139*
*NPI: 1427282466*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*Fax: (619) 825-9577*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**INTERNAL MEDICINE**

**GALLARES, DANIEL**
*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 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) 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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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**

**SAPRA, SONIA**
*Provider ID: 419139*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**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*
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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2500*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*SAN DIEGO*

7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**FLEMING, DAVID**
*Provider ID: 419139*
*Provider Gender: Male*
*License Number: PA12416*
*NPI: 1932329505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

7592 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 515-2550*
*After Hours Phone: (619) 515-2550*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## NATIONAL CITY

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*Provider ID: 418302*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*

2101 GRANGER AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**
*Provider ID: 417102*
*Provider Gender: Male*
*License Number: NP22974*
*NPI: 1356684781*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**DHARKAR-SURBER, SAPNA**
*Provider ID: 185270*
*Provider Gender: Female*
*License Number: NP95013257*
*NPI: 1538707765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*Fax: (619) 434-7310*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**
*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.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**NEVAREZ, IRENE**
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

**CERTIFIED NURSE PRACTITIONER**

**OCHOA, ERLINDA**
*Provider ID: 185270*
*Provider Gender: Female*
*License Number: NP4430*
*NPI: 1346437464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**
*Provider ID: 185270*
*Provider Gender: Female*
*License Number: NP17328*
*NPI: 1548450471*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Catalan, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**
*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*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**VERDUZCO GONZALEZ, AURORA**
*Provider ID: 185270*
*Provider Gender: Female*
*License Number: NP95001961*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*NPI: 1932452323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*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*
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: TH 8AM-2PM*

**FAMILY PRACTICE**

**ALGHAMDI, ASMA**
*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*
*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*
*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*
*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*
*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**

**CANLAS, AVELINO**
*Provider ID: 417102*
*Provider Gender: Male*
*License Number: A74854*
*NPI: 1275682528*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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/clinics/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**

**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/clinics/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/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**

# C. Direktoryo ng Pangunahing Pangangalaga

**LANUZA, MARK**
*Provider ID: 418930*
*Provider Gender: Male*
*License Number: 20A18460*
*NPI: 1992230593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**FAMILY PRACTICE**

**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*
*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**

**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*
*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*

*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*

*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 MEMORIAL HOSPITAL*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

330 E 8TH ST
NATIONAL CITY, CA 91950

*Phone: (619) 662-4100*

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

*Website: www.syhealth.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NOLASCO, JOANNA**

*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**

**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*
*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*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: 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*
*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*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*

*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SNOOK, BRIAN**
*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*
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 280-4213*
*After Hours Phone: (619) 280-4213*
*Website: www.lamaestra.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*
*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
*Phone: (619) 515-2399*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2399*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**
*Provider ID: 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*
*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*
*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*
*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/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*

**FQHC**

**SAN YSIDRO HEALTH**

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
*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*
*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*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

## INTERNAL MEDICINE

**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**
*Provider ID: 78388*
*Provider Gender: Male*
*NPI: 1871501205*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*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, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 434-7308*
*After Hours Phone: (619) 434-7308*
*Website: www.lamaestra.org*
*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**
*Provider ID: 185270*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 798-3977*
*After Hours Phone: (619) 798-3977*
*Website: www.lamaestra.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: Faroese, Fataleka*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: 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*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
*Phone: (619) 470-1945*

*Fax: (619) 475-5048*
*After Hours Phone: (619) 470-1945*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**BARBADILLO, TERESITA**
*Provider ID: 84258*
*Provider Gender: Female*
*NPI: 1952416695*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**DABU, LISA**
*Provider ID: 687944*
*Provider Gender: Female*
*NPI: 1881128254*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*
502 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
*Phone: (619) 475-6204*
*Fax: (619) 475-5174*
*After Hours Phone: (619) 475-6204*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**DAY, CHRISTOPHER**
*Provider ID: 418930*
*Provider Gender: Male*
*License Number: A163862*
*NPI: 1184121253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1000 EUCLID AVE
NATIONAL CITY, CA 91950
*Phone: (619) 515-2399*
*After Hours Phone: (619) 515-2399*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-3:30PM*
*TU 10:30AM-5:30PM*
*W 8:30AM-3:30PM*
*TH 10:30AM-5:30PM*
*F 8:30AM-3:30PM*

**PEDIATRICS**

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

**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*

*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*

*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*

*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*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**

*Provider ID: 206341*

*Provider Gender: Female*

*License Number: NP95003571*

*NPI: 1053776914*

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

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

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

**CERTIFIED NURSE PRACTITIONER**

**BAEK, KILHYO**

*Provider ID: 206341*

*Provider Gender: Female*

*License Number: NP95003571*

*NPI: 1053776914*

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

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

- 4700 N RIVER RD OCEANSIDE, CA 92057
- *Phone: (760) 631-5000*
- *After Hours Phone: (760) 631-5000*
- *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

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

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**

*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*

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# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*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*

*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*

*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*

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*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**BROMAN, GRETCHEN**

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# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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.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*
*License Number: NP95017483*
*NPI: 1679140644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
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*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*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*
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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**

**CHILAKA, SAMUEL**
*Provider ID: 206341*
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*NPI: 1679140644*
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*Cultural Competency: N*
*Board Certified Specialty: No*
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*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*Provider ID: 206341*
*Provider Gender: Male*
*License Number: NP95025871*
*NPI: 1689094971*

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# C. Direktoryo ng Pangunahing Pangangalaga

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CHRISTY, TYLER**
*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*
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*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*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*

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*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
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**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*
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*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*Provider ID: 206341*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*Provider ID: 206341*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
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OCEANSIDE, CA 92057
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*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**EVERETT, ELIZABETH**
*Provider ID: 206341*
*Provider Gender: Female*
*License Number: NP95025094*
*NPI: 1942952767*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Board Certified Specialty: No*

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# C. Direktoryo ng Pangunahing Pangangalaga

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 206341*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 402434*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

818 PIER VIEW WAY
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 402434*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

818 PIER VIEW WAY
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 402436*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

517 N HORNE ST
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 402436*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

517 N HORNE ST
OCEANSIDE, CA 92054

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 206341*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**

*Provider ID: 206341*

*Provider Gender: Female*

*License Number: NP95006826*

*NPI: 1619246907*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese, Mandarin*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4700 N RIVER RD
OCEANSIDE, CA 92057

*Phone: (760) 631-5000*

*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**

*Provider ID: 206341*

*Provider Gender: Female*

*License Number: NP95022679*

*NPI: 1407545221*

*Provider English Spoken: Y*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HARRIS, PAMELA**
*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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**
*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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**HOWELL, AMANDA**
*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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8AM-5PM*
*W 8AM-7PM*
*TH-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*License Number: NP95020584*
*NPI: 1851747166*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM 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) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*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) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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*
*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*
*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*
*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*

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*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*
*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*
*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*
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*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**FATLAND, SARAH**
*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*
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*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**KETCHEL, CLINT**
*Provider ID: 206341*
*Provider Gender: Male*
*License Number: A135564*

# C. Direktoryo ng Pangunahing Pangangalaga

*NPI: 1699038125*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, 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, Chaldean Neo-Aramaic, 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, Chaldean Neo-Aramaic, 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**FAMILY PRACTICE**

**KETCHEL, CLINT**

*Provider ID: 402434*

*Provider Gender: Male*

*License Number: A135564*

*NPI: 1699038125*

- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac*

*Cultural Competency: N*

*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, 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 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, Chaldean Neo-Aramaic, 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**

**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*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**NGUYEN, DANIELA**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**PANICKER, CIBU**
*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*
*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*
*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)*

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*631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*
*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*
*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.vistacommu*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*nityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*

**FAMILY PRACTICE**

**VIDAL, MONICA**
*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*
*Provider English Spoken: Y*
*Cultural Competency: N*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**FQHC**

**VISTA COMMUNITY CLINIC,**
*Provider ID: 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,**
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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*
*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*
*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*

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*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**INTERNAL MEDICINE**

**HASSANI, FARZANEH**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**PEDIATRICS**

**CALHOUN, CHANELLE**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider ID: 344145*
*Provider Gender: Female*
*NPI: 1437166709*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*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*

**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**

**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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PEDIATRICS**

**KRAMER, MELISSA**
*Provider ID: 469759*
*Provider Gender: Female*
*NPI: 1467833467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*Fax: (760) 547-1011*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**PEDIATRICS**

**MAC, VICTOR**
*Provider ID: 480247*
*Provider Gender: Male*
*License Number: 20A17766*
*NPI: 1790281236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**MAC, VICTOR**
*Provider ID: 480247*
*Provider Gender: Male*
*License Number: 20A17766*
*NPI: 1790281236*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation:*

# C. Direktoryo ng Pangunahing Pangangalaga

*COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*

**PEDIATRICS**

**MACINTYRE, ELIZABETH**
*Provider ID: 543354*
*Provider Gender: Female*
*NPI: 1336520766*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY BLDG B STE 130
OCEANSIDE, CA 92056
*Phone: (760) 547-1010*
*Fax: (760) 547-1011*
*After Hours Phone: (760) 547-1010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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*
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*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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*
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*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MILLER, DONALD**
*Provider ID: 433589*
*Provider Gender: Male*
*NPI: 1154356582*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY 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*

**PEDIATRICS**

**NOVOTA, GABRIELA**
*Provider ID: 685653*
*Provider Gender: Female*
*NPI: 1154520096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-4:30PM*

**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 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*

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OCEANSIDE, CA 92057

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*After Hours Phone: (760) 631-5000*

*Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PEDIATRICS**

**RONAN, KEVIN**

*Provider ID: 206341*

*Provider Gender: Male*

*License Number: G77176*

*NPI: 1225017353*

*Provider English Spoken: Y*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

## 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, Punjabi, Urdu*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

### FQHC

**NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,**
*Provider ID: 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*

### 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**PEDIATRICS**

**LOSTETTER, ADRIENNE**
*Provider ID: 261797*
*Provider Gender: Female*
*NPI: 1881607984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*Fax: (858) 673-1075*
*After Hours Phone: (858) 673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**MOREIRA, LUCILA**
*Provider ID: 523761*
*Provider Gender: Female*
*NPI: 1104846567*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*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: SU-SA 8AM-5PM*

**PEDIATRICS**

**MORTIMER, DORI**
*Provider ID: 230552*
*Provider Gender: Female*
*NPI: 1417928417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15725 POMERADO RD STE 203
POWAY, CA 92064
*Phone: (858) 673-3340*
*Fax: (858) 673-1075*
*After Hours Phone: (858)*

*673-3340*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RAMGREN, AILEEN**
*Provider ID: 397707*
*Provider Gender: Female*
*NPI: 1356785505*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: 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*
*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, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15525 POMERADO RD STE B1
POWAY, CA 92064
*Phone: (858) 487-8333*
*Fax: (858) 487-0856*
*After Hours Phone: (858) 484-4003*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*SA 8:30AM-12PM*

**PHYSICIANS ASSISTANT**

**BALDWIN, DONNA**
*Provider ID: 481187*
*Provider Gender: Female*
*License Number: PA23310*
*NPI: 1649692369*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

### 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) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

### INTERNAL MEDICINE

**HO, LYSA**
*Provider ID: 449438*
*Provider Gender: Female*
*License Number: 20A17507*
*NPI: 1821494337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

### INTERNAL MEDICINE

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

220 ROTANZI ST
RAMONA, CA 92065
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

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

## SAN DIEGO

**CARDIOVASCULAR DISEASE**

**BLUM, RICHARD**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: G53758*
*NPI: 1043310030*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*
*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**

**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.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**AQUINO, FELINO**

*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.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**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*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ARVIZU, MARGARITA**

*Provider ID: 417101*

*Provider Gender: Female*

*License Number: NP95024510*

*NPI: 1558058636*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*OPERATION SAMAHAN*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

# C. Direktoryo ng Pangunahing Pangangalaga

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**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*

**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*

**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*

**CERTIFIED NURSE PRACTITIONER**

**CELESTIN-RAMSEY, AKANKE**
*Provider ID: 451167*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider Gender: Female*
*License Number: NP8563*
*NPI: 1447450275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org /clinics/king- chavez- healt h- 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES-UPPAL, ALLISON**
*Provider ID: 207382*
*Provider Gender: Female*
*License Number: NP95026125*
*NPI: 1053002360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.OR G*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**DEMESSIE, RAHEL**
*Provider ID: 417101*
*Provider Gender: Female*
*License Number: NP95027483*
*NPI: 1619749041*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Amharic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsa mahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**DHARKAR-SURBER, SAPNA**

*Provider ID: 185268*
*Provider Gender: Female*
*License Number: NP95013257*
*NPI: 1538707765*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

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

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

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

**CERTIFIED NURSE PRACTITIONER**

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**
*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*
*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: 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*
*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.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

**HART, BECKY**
*Provider ID: 403583*
*Provider Gender: Female*

*License Number: NP95025699*
*NPI: 1316626344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HEFNER, ANNA**
*Provider ID: 417101*
*Provider Gender: Female*
*License Number: NP5512*
*NPI: 1588913537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HILL, GENIELYN**
*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.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**HILLIARD, THESALONICA**
*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*
*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*
*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: 206362*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNN JOY**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: NP17852*
*NPI: 1205019510*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Thai*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HORNEY, KRISTAN**
*Provider ID: 403583*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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: 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*

**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*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**JOHNSON, SHAWNA 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*

**CERTIFIED NURSE**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**PRACTITIONER**

**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*

**CERTIFIED NURSE PRACTITIONER**

**KHAN, MATTHEW**

*Provider ID: 417987*

*Provider Gender: Male*

*License Number: NP17838*

*NPI: 1942456124*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4874 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 515-2426*

*After Hours Phone: (619) 515-2426*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**KI, TRISH**

*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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**

**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.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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**CERTIFIED NURSE PRACTITIONER**

**LU, TAMMY**

*Provider ID: 206360*
*Provider Gender: Female*
*License Number: NP95007253*
*NPI: 1457879132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MANZO, CORINA**

*Provider ID: 207382*
*Provider Gender: Female*
*License Number: NP95020369*
*NPI: 1669087326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**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**

**MENDOZA, GRETEL MARIE**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider ID: 417101*
*Provider Gender: Female*
*License Number: NP95002233*
*NPI: 1245652387*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**MORAN, TIFFANY**
*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*
*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*
*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*
*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**PRACTITIONER**

**NOCEDA, ANA**

*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*

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**

*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*

*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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**OCAMPO, ELAINE**
Provider ID: 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
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: 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
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: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**ODA, THAGHAR**
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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

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

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**ORPILLA, IMELDA**
*Provider ID: 417101*
*Provider Gender: Female*
*License Number: NP95003211*
*NPI: 1790785988*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**CERTIFIED NURSE PRACTITIONER**

**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*
*Medi-Cal Open Panel: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**OWEN, MICHAEL**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: NP95001492*
*NPI: 1073869145*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**PADILLA, MICHELE**
*Provider ID: 403583*
*Provider Gender: Female*
*License Number: NP95020636*
*NPI: 1356083828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATEL, KELLY**
*Provider ID: 402851*
*Provider Gender: Female*
*License Number: NP95004735*
*NPI: 1033493747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*Provider ID: 206046*

*Provider Gender: Male*

*License Number: NP95012511*

*NPI: 1073169769*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*Provider ID: 206046*

*Provider Gender: Male*

*License Number: NP95012511*

*NPI: 1073169769*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**

*Provider ID: 482070*

*Provider Gender: Male*

*License Number: NP95012511*

*NPI: 1073169769*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*After Hours Phone: (858) 810-8700*

*Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CERTIFIED NURSE PRACTITIONER**

**PERRY, KATHERINE**

*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)*

# C. Direktoryo ng Pangunahing Pangangalaga

*234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**QUINTO, CINDY**
*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*

**CERTIFIED NURSE PRACTITIONER**

**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*

**CERTIFIED NURSE PRACTITIONER**

**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*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**ROGERS, TANYA**
*Provider ID: 417987*
*Provider Gender: Female*
*License Number: NP95004443*
*NPI: 1558710038*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*

# C. Direktoryo ng Pangunahing Pangangalaga

*FAMILY HEALTH CENTERS OF SAN DIEGO*
4874 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 515-2426*
*After Hours Phone: (619) 515-2426*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*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
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 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*
*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*
*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**

**SAMPSON, ANDRIECE**
*Provider ID: 207382*
*Provider Gender: Female*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*License Number: NP95026377*
*NPI: 1619594124*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
*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*
*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*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 8AM-8PM*
*W-F 8AM-5PM*
*SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*Provider ID: 206046*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider Gender: Female*
*License Number: NP7022*
*NPI: 1225012842*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*
- *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M 8AM-5PM*
  *TU 8AM-8PM*
  *W-F 8AM-5PM*
  *SA 9AM-1PM*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*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*

*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*

*Medi-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**

**SAVILLE, EDITH**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: NP7374*
*NPI: 1730567678*
- *Provider English Spoken: Y*

*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- *Phone: (619) 515-2545*
- *After Hours Phone: (619) 515-2545*
- *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-TH 8AM-9PM*

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# C. Direktoryo ng Pangunahing Pangangalaga

*F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**SCOTT, KELLY**

*Provider ID: 207382*
*Provider Gender: Female*
*License Number: NP95015026*
*NPI: 1013420801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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*
*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*
*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: 417429*
*Provider Gender: Female*
*License Number: NP95006792*
*NPI: 1730604414*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**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*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

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

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

**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*

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*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

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

**CERTIFIED NURSE PRACTITIONER**

**WEICKERT, MARIA**
*Provider ID: 417429*
*Provider Gender: Female*
*License Number: NP95010814*
*NPI: 1841758984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*Provider ID: 402851*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, TAKISHA**
*Provider ID: 416831*
*Provider Gender: Female*
*License Number: NP95013978*
*NPI: 1881727386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*

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# C. Direktoryo ng Pangunahing Pangangalaga

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**WILLIAMS, BREAHNA**
*Provider ID: 185268*
*Provider Gender: Female*
*License Number: NP95001840*
*NPI: 1063884864*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**CERTIFIED NURSE PRACTITIONER**

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

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

*N*

*Accessibility: CONTACT PROVIDER*

**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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**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- healt h- center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**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.operationsa mahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CHIROPRACTOR**

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

**CHIROPRACTOR**

**GILIBERTO, 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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**CHIROPRACTOR**

**GILIBERTO, JOSEPH**

*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*

*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*

*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*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 280-4213*

*After Hours Phone: (619) 280-4213*

*Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*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*

*License Number: DC33300*

*NPI: 1003296096*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

*Phone: (619) 662-4100*

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

*Website: 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: French, 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*

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*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*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

**CHIROPRACTOR**

**SOSA, DAVID**

*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*

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CHIROPRACTOR**

**TAGHIZADEH, MAJID**

*Provider ID: 417937*

*Provider Gender: Male*

*License Number: DC30121*

*NPI: 1750590600*

*Provider English Spoken: Y*

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

# C. Direktoryo ng Pangunahing Pangangalaga

*Turkish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

## CHIROPRACTOR

**TRUONG, 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.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

## CLINIC OUTPATIENT

**OPERATION SAMAHAN RANCHO PENASQUITOS,**
*Provider ID: 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

## DERMATOLOGY

**BURROWS, WILLIAM**
*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

**CARTER, NATASHA**
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY 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*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 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*

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

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# C. Direktoryo ng Pangunahing Pangangalaga

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

**ENDOCRINOLOGY METABOLISM DIABETES**

**HOSEIN, NADEEN**

*Provider ID: 417937*
*Provider Gender: Female*
*License Number: A113255*
*NPI: 1912051715*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**ISLAM, JULIE**

*Provider ID: 206363*
*Provider Gender: Female*
*License Number: A149552*
*NPI: 1750780516*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bengali, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**LEVINE, MATTHEW**

*Provider ID: 206360*
*Provider Gender: Male*
*License Number: A77126*
*NPI: 1801994231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**LORENZO, PATRICIA**

*Provider ID: 206360*
*Provider Gender: Female*
*License Number: A129599*
*NPI: 1487913315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ENDOCRINOLOGY METABOLISM DIABETES**

**MCCALLUM, JAMES**

*Provider ID: 206360*
*Provider Gender: Male*
*License Number: A55708*
*NPI: 1609838994*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-6PM*
*TH 8:30AM-6PM*
*F 8:30AM-5PM*
*SA 8:30AM-5PM*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**

*Provider ID: 206360*
*Provider Gender: Female*
*License Number: A146838*
*NPI: 1720474141*
*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*

**ENDOCRINOLOGY METABOLISM DIABETES**

**PHILIS-TSIMIKAS, ATHENA**

*Provider ID: 206360*
*Provider Gender: Female*
*License Number: A50477*
*NPI: 1922105964*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Greek*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*Hours: M-F 9AM-5PM*

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

**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*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

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

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

**FAMILY PRACTICE**

**BORTNER, ADAM**
*Provider ID: 417937*
*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*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**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*

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM*
*TH 9AM-6PM*
*F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BROWN, BRANDON**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: A148499*
*NPI: 1013399559*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**FAMILY PRACTICE**

**BURTON, LUCAS**
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**BURTON, LUCAS**
*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*
*Medi-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*
*Provider Gender: Female*
*License Number: A157488*
*NPI: 1316479892*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4194*
*After Hours Phone: (619) 662-4194*
*Website: www.syhealth.org /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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

**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**

**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: 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*
*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
*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: 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**

**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*
*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.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**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider ID: 451167*
*Provider Gender: Female*
*License Number: A165432*
*NPI: 1265921365*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org /clinics/king- chavez- healt h- 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**

**DAVIS, DEIRDRE**
*Provider ID: 693813*
*Provider Gender: Female*
*NPI: 1265921365*
*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*
*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-5PM*

**FAMILY PRACTICE**

**DOSCAS, MICHELLE**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: A163633*
*NPI: 1306343421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, 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*

**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- healt h- 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*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider Gender: Male*
*License Number: A171135*
*NPI: 1033647409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**GIRGIS, CHERIF**
*Provider ID: 417101*
*Provider Gender: Male*
*License Number: A105162*
*NPI: 1023237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**FAMILY PRACTICE**

**GLEASON ROHRER, GWEN**
*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*
*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*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*After Hours Phone: (619) 280-2058*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
*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*
*Medi-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: 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*
*Medi-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*
*Medi-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- healt h- 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 SAN DIEGO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org*

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

**FAMILY PRACTICE**

**HERRERA, SARAH**
*Provider ID: 690576*
*Provider Gender: Female*
*NPI: 1356927313*
- *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*

*Fax: (858) 633-4680*
- *After Hours Phone: (858) 810-8700*
- *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**

**HERRERA, SARAH**
*Provider ID: 690575*
*Provider Gender: Female*
*NPI: 1356927313*
- *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*

*Fax: (858) 633-4680*
- *After Hours Phone: (858) 279-0925*
- *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**

**JAINCHILL, AMANDA**
*Provider ID: 417101*
*Provider Gender: Female*
*License Number: A141541*
*NPI: 1720426901*
- *Provider English Spoken: Y*

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# C. Direktoryo ng Pangunahing Pangangalaga

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*

*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**FAMILY PRACTICE**

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*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*

*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*

*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*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

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

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**LOUGH, MICHELLE**
*Provider ID: 206363*
*Provider Gender: Female*
*License Number: A165872*
*NPI: 1053816496*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**LU, JULIE**
*Provider ID: 418142*
*Provider Gender: Female*
*License Number: 20A14804*
*NPI: 1619210614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF*

*SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MANDOYAN, AUSTIN**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: A161682*
*NPI: 1841726148*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM TU-TH 8AM-6PM F 8AM-5:30PM SA 8AM-5PM*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*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) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**MARSTON, JACQUELINE**
*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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**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*
*Medi-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*
*Medi-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: 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**FAMILY PRACTICE**

**MCLAUGHLIN, ERIK**
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*After Hours Phone: (619) 234-2158*
*Website: WWW.SDAIHC.ORG*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Indian Health Services: Y*

**FAMILY PRACTICE**

**MELGAR, MONICA**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**MORALES, ALEJANDRA**
*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*

**FAMILY PRACTICE**

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

**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*

# C. Direktoryo ng Pangunahing Pangangalaga

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**NGUYEN CLEARY, THAI**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A86079*
*NPI: 1467442624*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

**NIAZI, HARRIS**
*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*

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**PAYAMI, MADDIHA**
*Provider ID: 417429*
*Provider Gender: Female*
*License Number: 20A14012*
*NPI: 1336484104*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**PROPST, TOBE**
*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*

**FAMILY PRACTICE**

**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*
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*
*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**

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*Website: www.syhealth.org /clinics/king- chavez- healt h- 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**

**RODRIGUEZ, LOUIE**

*Provider ID: 206360*

*Provider Gender: Male*

*License Number: A176144*

*NPI: 1558823625*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

1809 NATIONAL AVE
SAN DIEGO, CA 92113

*Phone: (619) 515-2300*

*After Hours Phone: (619) 515-2300*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**RODRIGUEZ, LOUIE**

*Provider ID: 417937*

*Provider Gender: Male*

*License Number: A176144*

*NPI: 1558823625*

*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*

**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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**FAMILY PRACTICE**

**SCOTT, RYLEE**
*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*

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**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*

**FAMILY PRACTICE**

**SHIRAKI, JEAN**
*Provider ID: 417987*
*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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Website: www.ibclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

**SWARTZ, JOHN**
*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 PROVIDER*
*Hours: M-F 8AM-5PM*

**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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**FAMILY PRACTICE**

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

**FAMILY PRACTICE**

**TRAN, UYEN THAO**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: A76709*
*NPI: 1891720355*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*Fax: (619) 795-2756*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FAMILY PRACTICE**

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

**FAMILY PRACTICE**

**TRUONG, NHA**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: 20A17836*
*NPI: 1760975833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2400*
*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)*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

*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*

*Medi-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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**

*Provider ID: 418142*

*NPI: 1336525906*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

*Phone: (619) 515-2454*

*Fax: (619) 794-2696*

*After Hours Phone: (619) 515-2454*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**

*Provider ID: 664747*

*NPI: 1336525906*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

2114 NATIONAL AVE

# C. Direktoryo ng Pangunahing Pangangalaga

SAN DIEGO, CA 92113
*Phone: (619) 515-2406*
*After Hours Phone: (619) 515-2406*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**FQHC**

**FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,**
*Provider ID: 419529*
*NPI: 1235521782*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*Fax: (619) 269-0053*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FQHC**

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

**FQHC**

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

**FQHC**

**FAMILY HLTH CTR SD HILLCREST,**
*Provider ID: 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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- healt h- 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*

*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: 1780665877*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*

*Website: www.sdfamilycare .org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**LINDA VISTA HEALTH CARE CTR,**

*Provider ID: 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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**

*Provider ID: 624977*

*NPI: 1447281936*

*Provider English Spoken: Y*

*Cultural Competency: N*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

2204 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2355*
*Fax: (619) 232-7011*
*After Hours Phone: (619) 515-2355*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**
*Provider ID: 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**MID-CITY COMMUNITY CLINIC,**
*Provider ID: 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*
*After Hours Phone: (619) 563-0250*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FQHC**

**MID-CITY COMMUNITY CLINIC,**
*Provider ID: 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**FQHC**

**NESTOR COMMUNITY HEALTH CENTER,**
*Provider ID: 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*
*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**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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*

*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*

*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*

*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*

*NPI: 1861933897*

*Provider English Spoken: Y*

*Cultural Competency: N*

*OPERATION SAMAHAN*

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

*Phone: (844) 200-2426*

*Fax: (858) 536-8034*

*After Hours Phone: (844) 200-2426*

*Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**FQHC**

**OPERATION SAMAHAN - MIRA MESA,**

*Provider ID: 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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): 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*

*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*

*NPI: 1003902917*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

2630 1ST AVE
SAN DIEGO, CA 92103

*Phone: (619) 234-2158*

*Fax: (619) 234-0206*

*After Hours Phone: (619) 234-2158*

*Website: WWW.SDAIHC.ORG*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Indian Health Services: Y*

**FQHC**

**SAN DIEGO FAMILY CARE,**

*Provider ID: 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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**SAN YSIDRO HEALTH 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*

**FQHC**

**SAN YSIDRO HEALTH CHC - OCEAN VIEW,**

*Provider ID: 227409*

*NPI: 1326225632*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

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

**FQHC**

**SHERMAN HEIGHTS FAMILY HLTH CTRS INC,**
*Provider ID: 356145*
*NPI: 1174549232*
*Provider English Spoken: Y*
*Cultural Competency: N*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2391 ISLAND AVE
SAN DIEGO, CA 92102
*Phone: (619) 515-2435*
*Fax: (619) 515-2435*
*After Hours Phone: (619) 515-2435*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FQHC**

**ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,**
*Provider ID: 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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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**

**GADDIPATI, KISHORE**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A111638*
*NPI: 1720114093*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Hindi, Spanish, Telugu, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GASTROENTEROLOGY**

**HAI, FAIZI**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A159324*
*NPI: 1639523228*
*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*

**GASTROENTEROLOGY**

**STIPHO, SALLY**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: A104647*
*NPI: 1467642215*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*After Hours 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*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**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*
*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*
*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*

**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*

## 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*

*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: 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

**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

**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*

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

**INTERNAL MEDICINE**

**ANDERSON, KENDELL**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: 20A15598*
*NPI: 1285028191*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

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

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: 20A19248*
*NPI: 1124521901*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**BENITEZ, MARTHA**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: 20A19248*
*NPI: 1124521901*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*

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

**INTERNAL MEDICINE**

**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*
*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
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHAN, ANDY**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHANDRADAS, SAJIV**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A122474*
*NPI: 1720350465*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**CHEN, JAMES**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A86644*
*NPI: 1265495691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**CSAPOCZI, PETER**
*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- healt h- 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**

**CUMMINS, ANDREW**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A102764*
*NPI: 1699917096*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**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*
*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*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DIEP, KEVIN**
*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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**DODGE, JOHN**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: G67831*
*NPI: 1770510489*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE

SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**DOMINGUEZ, FERNANDO**
*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*
*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) 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**

**GEHR, MARC**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: G67338*
*NPI: 1306800180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

*MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**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**

**HAN, PAUL**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A116816*
*NPI: 1053553339*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**INTERNAL MEDICINE**

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

**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*

**INTERNAL MEDICINE**

**HIGGINSON, MICHELLE**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: A74420*
*NPI: 1114955879*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**JACKSON, GAVIN**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: A110647*
*NPI: 1609033182*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**INTERNAL MEDICINE**

**JAMISON, KAREN**
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Phone: (619) 515-2545*
*Fax: (619) 501-9645*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**KARCHES, KELLI**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: A80931*
*NPI: 1891997631*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**INTERNAL MEDICINE**

**KHANNA, POORNIMA**
*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): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**KRIJGER, LISA**
*Provider ID: 403583*
*Provider Gender: Female*
*License Number: A67762*
*NPI: 1932278710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LALITHAKUMARI, ARYA**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: A140646*
*NPI: 1265874010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LAMANTIA, MICHELE**
*Provider ID: 451167*
*Provider Gender: Female*
*License Number: G71855*
*NPI: 1124176102*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org /clinics/king- chavez- healt h- center*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**LEE, MICHAEL**
*Provider ID: 206360*
*Provider Gender: Male*
*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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**INTERNAL MEDICINE**

**NARANJO, RODRIGO**
*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
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare .org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

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

**INTERNAL MEDICINE**

**OLIVER, DEANNA**
*Provider ID: 417101*
*Provider Gender: Female*
*License Number: A139921*
*NPI: 1750725362*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, ST AGNES MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, ADVENTIST MEDICAL CENTER, SCRIPPS MERCY HOSPITAL*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**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 SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**PREVALLET, ALEXANDER**
*Provider ID: 417937*
*Provider Gender: Male*
*License Number: 20A19716*
*NPI: 1659833556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

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

**INTERNAL MEDICINE**

**RESNIKOFF, PAMELA**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: G80358*
*NPI: 1841252533*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**RIVERA, TANIA**
*Provider ID: 206363*
*Provider Gender: Female*
*License Number: A126958*
*NPI: 1336346972*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**ROUEL, WADI**
*Provider ID: 185268*
*Provider Gender: Male*
*License Number: C55979*
*NPI: 1740254713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.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*
*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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 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*
*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*
*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**

**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*
*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*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# C. Direktoryo ng Pangunahing Pangangalaga

*PROVIDER*

**INTERNAL MEDICINE**

**VALDEZ, KRYSTAL ANGELI**

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

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

**INTERNAL MEDICINE**

**VIDAURRAZAGA, MONICA**

*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*

*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*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

- *Phone: (858) 279-0925*
- *After Hours Phone: (858) 279-0925*
- *Website: www.sdfamilycare.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

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

**INTERNAL MEDICINE**

**WATTANAMANO, PORNTHEP**

*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*

*Medi-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*

*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- healt h- center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**INTERNAL MEDICINE**

**YUNG, STEVEN**

*Provider ID: 417937*

*Provider Gender: Male*

*License Number: G80798*

*NPI: 1689636656*

*Provider English Spoken: Y*

*Cultural Competency: N*

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

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**

*Provider ID: 206363*

*Provider Gender: Male*

*License Number: 20A7241*

*NPI: 1689788234*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

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

# C. Direktoryo ng Pangunahing Pangangalaga

*MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

## INTERVENTIONAL CARDIOLOGY

**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: 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*

## 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*

## NEUROLOGY

**CANTU-REYNA, GUILLERMO**
*Provider ID: 185268*
*Provider Gender: Male*
*License Number: A41375*
*NPI: 1447389101*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

*Phone: (619) 255-9155*

*After Hours Phone: (619) 255-9155*

*Website: www.lamaestra.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**

**GRISOLIA, JAMES**

*Provider ID: 417937*

*Provider Gender: Male*

*License Number: G42884*

*NPI: 1336102359*

*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*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**NEUROLOGY**

**LUHAR, RIYA**

*Provider ID: 417937*

*Provider Gender: Female*

*License Number: 20A19975*

*NPI: 1235665662*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Gujarati, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**NEUROLOGY**

**MARTIN, FREDERIC**

*Provider ID: 417937*

*Provider Gender: Male*

*License Number: G61965*

*NPI: 1265582605*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

4094 4TH AVE
SAN DIEGO, CA 92103

*Phone: (619) 515-2545*

*After Hours Phone: (619) 515-2545*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

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

**NEUROLOGY**

**TAFRESHI, GILDA**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: A103111*
*NPI: 1891946950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

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

**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:*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*
*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: 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*
*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: 402851*
*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*
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-TH 8:30AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**OBSTETRICS / GYNECOLOGY**

**ALIMONOS, LYSISTRATI**

*Provider ID: 206363*
*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*
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*

**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*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**BUECHNER, CHARLENE**
*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*
*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*
*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*
*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*
*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*
*Medi-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: 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*

# C. Direktoryo ng Pangunahing Pangangalaga

*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**CARTER, KHALIL**
*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*
*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*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**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) 515-2444*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-W 8:30AM-5PM TH 9:30AM-6PM*

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**

*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*

*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**

**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**

**CHOI, KENNY**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: C54696*
*NPI: 1063481117*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: 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**

**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*

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*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**

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

**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*
*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: 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*
*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**

**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*
*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**

**GRANT, REBEKAH**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: C159737*
*NPI: 1326243833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL, RIVERSIDE COMMUNITY HOSP, HOAG HOSPITAL IRVINE*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-7PM*
*TU-TH 8AM-6PM*
*F 8AM-5:30PM*
*SA 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**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
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 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: 416831*
*Provider Gender: Female*
*License Number: C174771*
*NPI: 1053392035*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619)*

*515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**HANLEY, LAUREN**
*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*
*NPI: 1649208711*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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: 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**

**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
*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: 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**

**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: 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*
*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: 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**

**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*
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- *Website: www.fhcsd.org*

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

**OBSTETRICS / GYNECOLOGY**

**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*

*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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 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, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*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*
*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*
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*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*Provider ID: 206363*
*Provider Gender: Female*
*License Number: A164859*
*NPI: 1952751711*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**
*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*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**OBSTETRICS / GYNECOLOGY**

**STABEN, REBECCA**

*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*
*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- healt h- 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: 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: 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*
*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**

**ZIEG, ALAN**
*Provider ID: 402851*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
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: 206362*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3544 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

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

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*Provider ID: 206362*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 3544 30TH ST
  SAN DIEGO, CA 92104
- *Phone: (619) 515-2424*
- *After Hours Phone: (619) 515-2424*
- *Website: www.fhcsd.org*

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

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- *Phone: (619) 515-2300*
- *After Hours Phone: (619) 515-2300*
- *Website: www.fhcsd.org*

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

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
*Provider ID: 416831*
*Provider Gender: Male*
*License Number: G78814*
*NPI: 1699790634*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL,*

*SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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: 206360*
*Provider Gender: Male*
*License Number: G61394*
*NPI: 1649206541*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-7:30PM*
*TU-F 8:30AM-5:30PM*

**OPHTHALMOLOGY**

**SHAW, BLAKE**
*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): N*
*Accessibility: CONTACT PROVIDER*

**OPHTHALMOLOGY**

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**PEDIATRICS**

**ABRAMSON, RACHEL**

*Provider ID: 185268*

*Provider Gender: Female*

*License Number: A104918*

*NPI: 1588707178*

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

*Cultural Competency: N*

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

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

- *Phone: (619) 280-4213*
- *After Hours Phone: (619) 280-4213*
- *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*
- *Hours: M-F 8AM-6PM SA 8AM-2PM*

**PEDIATRICS**

**ADJAN, ROULA**

*Provider ID: 185268*

*Provider Gender: Female*

*License Number: A81682*

*NPI: 1992847263*

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

*Cultural Competency: N*

*Board Certified Specialty: No*

*LA MAESTRA FAMILY CLINIC*

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

- *Phone: (619) 255-9155*

*Fax: (619) 749-5480*

- *After Hours Phone: (619) 255-9155*
- *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

- *Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**ADLOUNI, LOUBABA**

*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**

**ALBINO, NICHOLAS**

*Provider ID: 416831*

*Provider Gender: Male*

*License Number: A179851*

*NPI: 1740843499*

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

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

3514 30TH ST
SAN DIEGO, CA 92104

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**ANDREE, GREGOR**
*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*
*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) Spoken: German, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*After Hours Phone: (858) 810-8700*
*Website: www.sdfamilycare.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-9PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**PEDIATRICS**

**ARCHAMBAULT, CHRISTIAN**
*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*

**PEDIATRICS**

**AWDYKOVYCH, MARTA**
*Provider ID: 206360*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider Gender: Female*
*License Number: A44027*
*NPI: 1447265137*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**AYSON, NICOLE**
*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*
*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, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**CARSON, STEPHEN**
*Provider ID: 6735*
*Provider Gender: Male*
*NPI: 1780719872*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-5437*
*Fax: (619) 297-4567*
*After Hours Phone: (619) 297-5437*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8:30PM*
*F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**CASTELNOVI, CLAUDIA**
*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.org*
*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*
*Accessibility: CONTACT PROVIDER*

**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*

**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*

**PEDIATRICS**

**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*

**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 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: 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**

**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**

**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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
*Phone: (619) 265-3400*
*Fax: (619) 265-3407*
*After Hours Phone: (619) 265-3400*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**HIBBS, NICOLE**
*Provider ID: 143979*
*Provider Gender: Female*
*NPI: 1164627832*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-5437*
*Fax: (619) 297-4567*
*After Hours Phone: (619) 297-5437*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8:30PM*
*F 8AM-5PM*
*SA 8AM-2PM*

**PEDIATRICS**

**HOANG, VY**
*Provider ID: 161902*
*Provider Gender: Female*
*NPI: 1649575135*
*Provider English Spoken: Y*
*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*
6699 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (619) 265-3400*
*Fax: (619) 265-3407*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

**HORMOZDYARAN, SANAYA**
*Provider ID: 612398*
*Provider Gender: Female*
*NPI: 1750887634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
2790 TRUXTUN RD STE 120A
SAN DIEGO, CA 92106
*Phone: (619) 222-1253*
*Fax: (619) 222-1276*
*After Hours Phone: (619) 222-1253*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**JORDAN, JAMIE**
*Provider ID: 237831*
*Provider Gender: Female*
*NPI: 1275762833*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**PEDIATRICS**

**KESANAPALLI, DEEPTHI**
*Provider ID: 235069*
*Provider Gender: Female*
*NPI: 1487948584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Telugu*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 335
SAN DIEGO, CA 92123
*Phone: (858) 576-8010*
*Fax: (858) 576-7391*
*After Hours Phone: (858) 576-8010*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-6PM*
*F 8:30AM-12PM*

**PEDIATRICS**

**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*

**PEDIATRICS**

**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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Phone: (619) 582-8814*
*Fax: (619) 582-8813*
*After Hours Phone: (619) 582-8814*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**LOPER, KAREN**
*Provider ID: 490610*
*Provider Gender: Female*
*NPI: 1619908936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
*Phone: (619) 297-5437*
*Fax: (619) 297-4567*
*After Hours Phone: (619) 297-5437*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**LUJAN, ARLEEN**
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PEDIATRICS**

**MARTINEZ-ANDREE, INGRID**
*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**

**NGUYEN, JANICE**
*Provider ID: 416831*
*Provider Gender: Female*
*License Number: A157335*
*NPI: 1760916589*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

# C. Direktoryo ng Pangunahing Pangangalaga

**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**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: G81658*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**RODRIGUEZ, ALDO**
*Provider ID: 451167*
*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*
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*
*Medi-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**

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

**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-12PM*

**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 SAN DIEGO*
3514 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PEDIATRICS**

**SEBSO, JODI**
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**SELLERS, JAIME**
*Provider ID: 206360*
*Provider Gender: Female*

*License Number: A159494*
*NPI: 1720512015*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, 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**

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

**PEDIATRICS**

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

**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*
*Provider Language(s) Spoken: Tamil*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
*Phone: (858) 793-1011*
*After Hours Phone: (858) 793-1011*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*

**PEDIATRICS**

**SULEIMAN QAFITI, KHAWLA**
*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) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM*

**PEDIATRICS**

**TAMAYO, MAITHE**
*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*
*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-12PM*

**PEDIATRICS**

**WATERS, ELIZABETH**
*Provider ID: 153090*
*Provider Gender: Female*
*NPI: 1730477621*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
*Phone: (619) 262-8624*
*Fax: (619) 262-6639*
*After Hours Phone: (619) 262-8624*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**WEATHERLY, JACOB**
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-12PM*

**PEDIATRICS**

**WONG, IAN**
*Provider ID: 689204*
*Provider Gender: Male*
*NPI: 1174152128*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
11943 EL CAMINO REAL
STE 210
SAN DIEGO, CA 92130
*Phone: (858) 793-1011*
*Fax: (858) 793-1035*
*After Hours Phone: (858) 793-1011*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-12PM*

**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*
*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: 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**

**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**

**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*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
*Phone: (619) 515-2422*
*After Hours Phone: (619) 515-2422*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**

*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*
*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**

**BHAGAN, SHANNA**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: PA59874*
*NPI: 1437635943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**BHAGAN, SHANNA**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: PA59874*
*NPI: 1437635943*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

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

**PHYSICIANS ASSISTANT**

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

**PHYSICIANS ASSISTANT**

**CONDEZ, EDSEL**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: PA53129*
*NPI: 1073978680*
*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*

**PHYSICIANS ASSISTANT**

**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*

**PHYSICIANS ASSISTANT**

**DAVID, MARVIC**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: PA53748*
*NPI: 1750832317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**DRAME, SALWA**

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PHYSICIANS ASSISTANT**

**FINK, PATRICK**
*Provider ID: 402851*
*Provider Gender: Male*
*License Number: PA52704*
*NPI: 1922380328*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3705 MISSION BLVD
SAN DIEGO, CA 92109
*Phone: (619) 515-2444*
*After Hours Phone: (619) 515-2444*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5:30PM TH 9AM-6PM F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HOXMEIER, KRYSTA**
*Provider ID: 418142*
*Provider Gender: Female*
*License Number: PA58505*
*NPI: 1104203454*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
*Phone: (619) 515-2454*
*After Hours Phone: (619) 515-2454*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**HOXMEIER, KRYSTA**
*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: 206362*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8AM-5PM*

**PHYSICIANS ASSISTANT**

**LAPINA, LORI**
*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**

**LAPINA, LORI**
*Provider ID: 206362*
*Provider Gender: Female*
*License Number: PA23231*
*NPI: 1245670413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Website: www.fhcsd.org*

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

**PHYSICIANS ASSISTANT**

**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
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

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

**PHYSICIANS ASSISTANT**

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PHYSICIANS ASSISTANT**

**MERCER, KELLY**
*Provider ID: 185268*
*Provider Gender: Female*
*License Number: PA21625*
*NPI: 1154609790*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*LA MAESTRA FAMILY CLINIC*
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 255-9155*
*After Hours Phone: (619) 255-9155*
*Website: www.lamaestra.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-2PM*

**PHYSICIANS ASSISTANT**

**MILLER, LAUREL**
*Provider ID: 206363*
*Provider Gender: Female*
*License Number: PA20378*
*NPI: 1598992133*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**NUNO, JOSE**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: PA15227*
*NPI: 1275543068*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**PENA, NICHOLAS**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: PA56636*
*NPI: 1083176077*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*

# C. Direktoryo ng Pangunahing Pangangalaga

1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**
*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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**PHYSICIANS ASSISTANT**

**SCHELLIE, SCOTT**
*Provider ID: 417429*
*Provider Gender: Male*
*License Number: PA53288*
*NPI: 1699053843*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
*Phone: (619) 515-2525*
*After Hours Phone: (619) 515-2525*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**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**

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PHYSICIANS ASSISTANT**

**TREUNER, JULIE**
*Provider ID: 206360*
*Provider Gender: Female*
*License Number: PA17478*
*NPI: 1922013614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

**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*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

SAN DIEGO, CA 92129
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*W 10AM-7PM*
*TH-F 8:30AM-5:30PM*

**PHYSICIANS ASSISTANT**

**VARGAS, ROBERT**
*Provider ID: 206360*
*Provider Gender: Male*
*License Number: PA11194*
*NPI: 1972528081*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
1809 NATIONAL AVE
SAN DIEGO, CA 92113
*Phone: (619) 515-2300*
*After Hours Phone: (619) 515-2300*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PHYSICIANS ASSISTANT**

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

**PODIATRIST**

**JUAREZ, LETICIA**
*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*
*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*
*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*
*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*
*License Number: DPM2930*
*NPI: 1790890788*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: www.syhealth.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PODIATRIST**

**PANEK, JOHN**
*Provider ID: 417101*
*Provider Gender: Male*
*License Number: DPM6016*
*NPI: 1295795599*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*OPERATION SAMAHAN*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*After Hours Phone: (844) 200-2426*
*Website: www.operationsamahan.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**PODIATRIST**

**SCHNEIDER, SARAH**
*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*
*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*
*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*
*Medi-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: 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*
*Medi-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: 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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*.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*
*Medi-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*
*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**

**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*
*Medi-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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 9AM-4PM*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**
*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*
*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*
*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
*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*

**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*
*American Sign Language (ASL): 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*
*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*
*License Number: PT40975*
*NPI: 1235577560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

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

**REGISTERED PHYSICAL THERAPIST**

**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*

# C. Direktoryo ng Pangunahing Pangangalaga

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**

**SALES, JAN**
*Provider ID: 417937*
*Provider Gender: Female*
*License Number: PT303890*
*NPI: 1417650169*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4094 4TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 515-2545*
*After Hours Phone: (619) 515-2545*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-9PM F 8AM-5PM*

**REGISTERED PHYSICAL THERAPIST**

**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*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**RHEUMATOLOGY**

**REDDY, DANA**
*Provider ID: 403583*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5:30PM*

**RHEUMATOLOGY**

**REDDY, DANA**
*Provider ID: 206363*
*Provider Gender: Female*
*License Number: A115598*
*NPI: 1144538778*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
4725 MARKET ST
SAN DIEGO, CA 92102
*Phone: (619) 515-2560*
*After Hours Phone: (619) 515-2560*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

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

**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**

**FODDA, RAMI**

*Provider ID: 614511*

*Provider Gender: Male*

*License Number: NP18788*

*NPI: 1164660452*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**

*Provider ID: 614511*

*Provider Gender: Male*

*License Number: NP18788*

*NPI: 1164660452*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**

*Provider ID: 614511*

*Provider Gender: Male*
*License Number: NP18788*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**FREEMAN, WANDA**
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CERTIFIED NURSE PRACTITIONER**

**HENLEY, MEARA**
*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*
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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 NURSE PRACTITIONER**

**KOUSARI, JHALEH**
*Provider ID: 206426*
*Provider Gender: Female*
*License Number: NP20893*
*NPI: 1811262405*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Board Certified Specialty: No*
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*Board Certified Specialty: No*
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# C. Direktoryo ng Pangunahing Pangangalaga

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

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

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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*

**CERTIFIED REGISTERED NURSE MIDWIFE**

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*License Number: NM235844*

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*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*

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

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*Fax: (760) 736-6744*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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# C. Direktoryo ng Pangunahing Pangangalaga

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*Board Certified Specialty: No*

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*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**TRUECARE,**

*Provider ID: 614511*

*NPI: 1245246917*

*Provider English Spoken: Y*

*Cultural Competency: N*

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*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 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*

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*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

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*NPI: 1811617939*

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*Cultural Competency: N*

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# C. Direktoryo ng Pangunahing Pangangalaga

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**FQHC**

**TRUECARE,**

*Provider ID: 614511*

*NPI: 1598484255*

*Provider English Spoken: Y*

*Cultural Competency: N*

*IHP OF SOUTHERN CAL-PHP*

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**TRUECARE,**

*Provider ID: 206426*

*NPI: 1598484255*

*Provider English Spoken: Y*

*Cultural Competency: N*

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*Provider ID: 206426*

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*Provider English Spoken: Y*

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*Accessibility: CONTACT PROVIDER*

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

**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*

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

**INTERNAL MEDICINE**

**PARIKH, MILIND**
*Provider ID: 206426*
*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*
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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*
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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**

**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: 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: 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: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA 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*

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

**PEDIATRICS**

**MALHOTRA, ARATI**
*Provider ID: 110242*
*Provider Gender: Female*
*NPI: 1215135306*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 566-1501*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**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) 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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PEDIATRICS**

**MALHOTRA, ARATI**
*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) 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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-6PM*
*TU 8AM-5PM*
*W-F 8AM-6PM*
*SA 8AM-5PM*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**PEDIATRICS**

**NEVES, VANESSA**
*Provider ID: 143763*
*Provider Gender: Female*
*NPI: 1174672547*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6797*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-5PM*

**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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 566-1501*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**PEDIATRICS**

**QUINTERO, CAROLYN**
*Provider ID: 614767*
*Provider Gender: Female*
*NPI: 1023033156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Afar, Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-5PM*

**PEDIATRICS**

**RAJARATNAM, AKASH**
*Provider ID: 690819*
*Provider Gender: Male*
*NPI: 1558942193*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**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*
*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*
*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*
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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*

**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*
*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*

*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*
*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*
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**CHISWICK, GARY**
*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 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*

# C. Direktoryo ng Pangunahing Pangangalaga

**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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**

*Provider ID: 206426*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**

*Provider ID: 206426*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**KOSEL, MATTHEW**

*Provider ID: 206426*
*Provider Gender: Male*
*License Number: PA17101*
*NPI: 1316947302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
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*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**

*Provider ID: 206426*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*Provider ID: 206426*
*Provider Gender: Female*
*License Number: PA62228*
*NPI: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
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*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

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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*

**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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**RUSSO, KRISTA**
*Provider ID: 206426*
*Provider Gender: Female*
*License Number: PA53036*
*NPI: 1922471192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Board Certified Specialty: No*
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*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*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*
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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):*

# C. Direktoryo ng Pangunahing Pangangalaga

*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 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PHYSICIANS ASSISTANT**

**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 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**SPENCE, JAMIE**

*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*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**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 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

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

*Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**

*Provider ID: 206426*

*Provider Gender: Female*

*License Number: PA51867*

*NPI: 1295147387*

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# C. Direktoryo ng Pangunahing Pangangalaga

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PHYSICIANS ASSISTANT**

**TAHRIRI, BAHAREH**
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*

**PODIATRIST**

**DASGUPTA, DEBORSHI**
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

## 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: KINDRED HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: www.syhealth.org/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

# C. Direktoryo ng Pangunahing Pangangalaga

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**

**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*
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*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*

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

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

# C. Direktoryo ng Pangunahing Pangangalaga

*/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**

**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
*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*

**CERTIFIED NURSE PRACTITIONER**

**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*
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*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**

**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*
*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**

**ORDINANZA, MYLENE**
*Provider ID: 227469*
*Provider Gender: Female*
*License Number: NP95019995*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

**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*

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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**

**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) 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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**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*
*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*
*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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

**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*

*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*

*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*

**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*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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*
*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*
*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**

# C. Direktoryo ng Pangunahing Pangangalaga

**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/clinic s/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*
*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*
*Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

**FAMILY PRACTICE**

**DAVIS, CHARLES**
*Provider ID: 685520*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider Gender: Male*
*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*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*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*

## FAMILY PRACTICE

**DUENAS RUIZ, KAREN**
*Provider ID: 692209*
*Provider Gender: Female*
*NPI: 1972181345*
*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) 205-6305*
*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

**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*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**FAMILY PRACTICE**

**HENDRIX, JEFFERSON**
*Provider ID: 227469*
*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*
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**

**HERNANDEZ, RALPH**
*Provider ID: 227469*
*Provider Gender: Male*
*License Number: C42207*
*NPI: 1285782151*
*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*

**FAMILY PRACTICE**

**HERNANDEZ, RALPH**
*Provider ID: 206292*
*Provider Gender: Male*
*License Number: C42207*
*NPI: 1285782151*
*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**

**KAUFHOLD, ANNE**
*Provider ID: 206292*
*Provider Gender: Female*
*License Number: A88893*
*NPI: 1164508073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*PROVIDER*

**FAMILY PRACTICE**

**LARA, LESLEY**

*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*

*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*

*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*

*Medi-Cal Open Panel: Yes*

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

**FAMILY PRACTICE**

**LEUTE, ERIC**
*Provider ID: 206292*
*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*
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**

**MOYA, MARY**
*Provider ID: 206292*
*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*
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**

**NAVARRO, VANESSA MARIA**
*Provider ID: 227469*
*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*
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**

**NGUYEN, CARIE**
*Provider ID: 206292*
*Provider Gender: Female*
*License Number: A106103*
*NPI: 1174781132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

**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 /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*
*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*
*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, Persian*

*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- *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**

**RAJAIPOUR, NEGIN**
*Provider ID: 227469*
*Provider Gender: Female*
*License Number: A145480*
*NPI: 1508286709*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Farsi, Persian*

*Cultural Competency: N*
*Hospital Affiliation: CHULA VISTA COMM HOSP*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
- 3364 BEYER BLVD
  SAN YSIDRO, CA 92173
- *Phone: (619) 662-4100*
- *After Hours Phone: (619) 662-4100*
- *Website: 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**

**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*

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

**FAMILY PRACTICE**

**ROJAS, SARAH**
*Provider ID: 206292*
*Provider Gender: Female*
*License Number: A139169*
*NPI: 1245645076*
- *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*
- *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*
*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*
*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**

**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*
*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*
*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*
*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 /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*
*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*
*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*
*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*
*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 /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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*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**

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

**FQHC**

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,**
*Provider ID: 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*
*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 - 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*

*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*

*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*

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

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

**INTERNAL MEDICINE**

**CHOW, MAN HUNG**

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# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*Provider Language(s) Spoken: Tagalog*
*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*

**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*
*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

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*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-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*
*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*
*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*
*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*
*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*
*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*
*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, GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, ST AGNES MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS 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*
*Provider Language(s) Spoken: Spanish*
*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*
*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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*
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**

**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*
*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*

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

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**
*Provider ID: 206292*
*Provider Gender: Male*
*License Number: 20A7241*
*NPI: 1689788234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*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*

**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: 206292*
*Provider Gender: Female*
*License Number: A104660*
*NPI: 1083815823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
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*

**OBSTETRICS / GYNECOLOGY**

**CARR, MIANDA**
*Provider ID: 227411*
*Provider Gender: Female*
*License Number: A104660*
*NPI: 1083815823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
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**

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

**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 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*
*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**

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

**OBSTETRICS / GYNECOLOGY**

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

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**

# C. Direktoryo ng Pangunahing Pangangalaga

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

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
*Provider ID: 227411*
*Provider Gender: Female*
*License Number: A175006*
*NPI: 1255878997*
*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*
*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*
*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*

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*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: 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: SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER, KERN MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: 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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**OBSTETRICS / GYNECOLOGY**

**SHORT, ABIADE**

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## OPHTHALMOLOGY

**SKAF, AYHAM**

*Provider ID: 227469*

*Provider Gender: Male*

*License Number: A120584*

*NPI: 1285888628*

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

*Cultural Competency: N*

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

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3364 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

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

*Website: https://www.syhealth.org/locations*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## PEDIATRICS

**ACEVEDO, SUSANA**

*Provider ID: 227411*

*Provider Gender: Female*

*License Number: A74960*

*NPI: 1801971569*

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

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

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

*Website: 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

**BARBADILLO, FERDINAND**

*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*

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*

**PEDIATRICS**

**BARBADILLO, FERDINAND**

*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*

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-TU 8:30AM-5:30PM*

**PEDIATRICS**

**CABARLO, JEHRIB**

*Provider ID: 227411*

*Provider Gender: Male*

*License Number: 20A8516*

*NPI: 1770661340*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*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/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**

**CHAIT LLAMAS, LWBBA**

*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/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**

**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/clinic s/maternal- child- health- center*

*Medi-Cal Open Panel: Yes*

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

**PEDIATRICS**

**GHAHREMANI, SIMIN**
*Provider ID: 206292*
*Provider Gender: Female*
*License Number: C51110*
*NPI: 1508904657*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
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*

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

**PEDIATRICS**

**PIANSAY, MARIA CORAZON**
*Provider ID: 206292*
*Provider Gender: Female*

# C. Direktoryo ng Pangunahing Pangangalaga

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

**PEDIATRICS**

**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*
*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
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*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*

**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*
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*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

**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 /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**

**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/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**

**SULLIVAN, ELISSA**

*Provider ID: 227411*

*Provider Gender: Female*

*License Number: A169577*

*NPI: 1790216422*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

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

*Website: 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*

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

**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/clinic s/maternal- child- health- center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*

**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**

**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*

*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*

*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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*

*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) 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*

**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*

*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*

*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*

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# C. Direktoryo ng Pangunahing Pangangalaga

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

**PODIATRIST**

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

**REGISTERED PHYSICAL THERAPIST**

**SHAUF, 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**SPEECH PATHOLOGIST**

**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*
*Medi-Cal Open Panel: Yes*
*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*
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN*

*AND NEWBORNS*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
*Phone: (619) 749-2150*
*Fax: (619) 456-9744*
*After Hours Phone: (619) 749-2150*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## SPRING VALLEY

### CERTIFIED NURSE PRACTITIONER

**LEONARD, BEVERLY**
*Provider ID: 206361*
*Provider Gender: Female*
*License Number: NP10943*
*NPI: 1285772392*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

### CERTIFIED NURSE PRACTITIONER

**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*

# C. Direktoryo ng Pangunahing Pangangalaga

*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
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**FAMILY PRACTICE**

**ROSE, PATRICIA**
*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*
*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*
*Medi-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**

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

# C. Direktoryo ng Pangunahing Pangangalaga

*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*
*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) 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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-7PM*
*W-F 8:30AM-5:30PM*

**OBSTETRICS / GYNECOLOGY**

**SAPRA, SONIA**
*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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider English Spoken: Y*
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Board Certified Specialty: No*
*FAMILY HEALTH CENTERS OF SAN DIEGO*
8788 JAMACHA RD
SPRING VALLEY, CA 91977
*Phone: (619) 515-2555*
*After Hours Phone: (619) 515-2555*
*Website: www.fhcsd.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**PEDIATRICS**

**JI, 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): N*

*Accessibility: CONTACT PROVIDER*

**PHYSICIANS ASSISTANT**

**LOPEZ, MARIO**

*Provider ID: 206361*

*Provider Gender: Male*

*License Number: PA21385*

*NPI: 1932335080*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PHYSICIANS ASSISTANT**

**TRAN, TU-UYEN**

*Provider ID: 206361*

*Provider Gender: Female*

*License Number: PA54588*

*NPI: 1598293748*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PHYSICIANS ASSISTANT**

**TURNER, ERIC**

*Provider ID: 206361*

*Provider Gender: Male*

*License Number: PA55067*

*NPI: 1669756128*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

8788 JAMACHA RD
SPRING VALLEY, CA 91977

*Phone: (619) 515-2555*

*After Hours Phone: (619) 515-2555*

*Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

## VALLEY CENTER

**CLINIC OUTPATIENT**

**NEIGHBORHOOD HEALTHCARE,**

*Provider ID: 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*

**FAMILY PRACTICE**

**AYON MARTINEZ, CARLOS**

# C. Direktoryo ng Pangunahing Pangangalaga

*Provider ID: 519918*
*Provider Gender: Male*
*License Number: A114419*
*NPI: 1154583128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## FAMILY PRACTICE

**CASTANER, ZALYA**
*Provider ID: 519918*
*Provider Gender: Female*
*License Number: A139490*
*NPI: 1487072179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9912*
*After Hours Phone: (760) 742-9912*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## FAMILY PRACTICE

**SCHULTZ, JAMES**
*Provider ID: 519918*
*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*
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*

## 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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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 TING**
*Provider ID: 400339*
*Provider Gender: Female*
*License Number: NP95006826*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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*

# C. Direktoryo ng Pangunahing Pangangalaga

## 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*

*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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

## FAMILY PRACTICE

**ESPINOSA-SILVA, YAMINAH**

*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*

*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, Chaldean Neo-Aramaic, 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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

# C. Direktoryo ng Pangunahing Pangangalaga

*631-5000*
*Website: www.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**FQHC**

**VCC DURIAN,**
*Provider ID: 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*
*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*
*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*

**INTERNAL MEDICINE**

**COPELAND, ARDETH**
*Provider ID: 687778*
*Provider Gender: Female*
*NPI: 1699704338*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**AMBO, STANLEY**
*Provider ID: 52269*
*Provider Gender: Male*
*NPI: 1891735676*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 180
VISTA, CA 92083
*Phone: (760) 945-3434*
*Fax: (760) 945-6761*
*After Hours Phone: (760) 945-3434*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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

*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*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

2067 W VISTA WAY STE 180
VISTA, CA 92083

*Phone: (760) 945-3434*

*Fax: (760) 945-6761*

*After Hours Phone: (760) 945-3434*

*Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**PEDIATRICS**

**HARTFORD, NICOLE**

*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.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**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

# C. Direktoryo ng Pangunahing Pangangalaga

*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.vistacommunityclinic.org*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*

**PEDIATRICS**

**NAUDIN, VERONICA**
*Provider ID: 84118*
*Provider Gender: Female*
*NPI: 1093755878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Board Certified 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-12PM*

**PEDIATRICS**

**NISHIKAWA, MOENA**
*Provider ID: 689220*
*Provider Gender: Female*
*NPI: 1407434533*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2067 W VISTA WAY STE 180
VISTA, CA 92083
*Phone: (760) 945-3434*
*Fax: (760) 945-6761*
*After Hours Phone: (760) 945-3434*
*Website: N/A*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PEDIATRICS**

**PERTL, URSULA**
*Provider ID: 593894*
*Provider Gender: Female*
*NPI: 1609947464*
*Provider English Spoken: Y*
*Provider Language(s)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# C. Direktoryo ng Pangunahing Pangangalaga

*Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES*
*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-12PM*

## 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

## ALPINE

### CHIROPRACTOR

**PHILLIPS, KATHERINE**

*Provider ID: 310866*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

*Phone: (619) 662-4100*

*Fax: (619) 205-6305*

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

*Provider Gender: Female*

*NPI: 1063927242*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### 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

**SILVASEPULVEDA, 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 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 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**

**CHAVEZSANTOS, 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) 720-7204*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1780061440*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268654*
*Board Certified 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*

# D. Direktoryo ng Provider na Espesyalista

## NEPHROLOGY

**HAMILTON, ROSS**

*Provider ID: 310675*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

*Phone: (760) 631-3000*

*Fax: (760) 631-3016*

*After Hours Phone: (760) 631-3000*

*Provider Gender: Male*

*NPI: 1538587852*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

## NEUROLOGY

**DROKER, BRIAN**

*Provider ID: 306953*

*Board Certified 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*

## OTOLARYNGOLOGY

**CHANG, EDWARD**

*Provider ID: 309534*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2390 FARADAY AVE
CARLSBAD, CA 92008

*Phone: (858) 909-0770*

*Fax: (858) 909-0880*

*After Hours Phone: (858) 909-0770*

*Provider Gender: Male*

*NPI: 1528146008*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): 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
CARLSBAD, CA 92011
*Phone: (760) 631-3000*
*Fax: (760) 631-3016*
*After Hours Phone: (760) 631-3000*
*Provider Gender: Male*
*NPI: 1497950208*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**SHIMIZU, KELSIE**
*Provider ID: 296819*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2390 FARADAY AVE
CARLSBAD, CA 92008
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1972107811*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: 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
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 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*

**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**
*Provider ID: 290591*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1598037178*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ARMSTON, LINDSEY**
*Provider ID: 309664*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1841851375*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**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: 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**

**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*
*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: 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**

**CARRION GELABERT, ANA**
*Provider ID: 302402*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 FOURTH AVESTE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1023178233*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**DE DIOS, SARAH JANE**
*Provider ID: 302418*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 369-4880*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1528632742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DE LA CRUZ, ALEKSANDRYA**
*Provider ID: 309695*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1336625524*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*Provider ID: 308352*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 THIRD AVESTE 2220
CHULA VISTA, CA 91911
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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**

**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*

**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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-4PM*
*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 AVESTE 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**

**SPAK, DARYL**

*Provider ID: 310870*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1285128025*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**
*Provider ID: 299164*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1972732584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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**

**CHAVEZ, LUIS**
*Provider ID: 311342*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
296 H ST STE 301
CHULA VISTA, CA 91910
*Phone: (619) 416-3510*
*Fax: (619) 243-3216*
*After Hours Phone: (619) 416-3510*
*Provider Gender: Male*
*NPI: 1295224905*
*Provider English Spoken: Y*
*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*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**WIENER, GREGORY**
*Provider ID: 290741*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
*Phone: (619) 585-8883*
*Fax: (619) 585-0166*
*After Hours Phone: (619) 585-8883*
*Provider Gender: Male*
*NPI: 1811099534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-4:30PM F 8:30AM-3PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PHP*

**GASTROENTEROLOGY**

**WIENER, GREGORY**
*Provider ID: 257480*
*Board Certified Specialty: Yes*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
*Phone: (619) 585-8883*
*Fax: (619) 585-0166*
*After Hours Phone: (619) 585-8883*
*Provider Gender: Male*
*NPI: 1811099534*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-4:30PM F 8:30AM-3PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, IHP of Southern Cal-PHP*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268688*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
310 3RD AVE STE C11
CHULA VISTA, CA 91910
*Phone: (619) 426-0841*
*Fax: (619) 426-9197*
*After Hours Phone: (619) 426-0841*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max 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) 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*
*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: 309249*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
865 3RD AVE STE 133
CHULA VISTA, CA 91911
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 245576*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**NAGHI, JESSE**
*Provider ID: 247625*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
*Phone: (619) 867-0557*
*Fax: (619) 867-0558*
*After Hours Phone: (619) 867-0557*
*Provider Gender: Male*
*NPI: 1386896736*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Bulgarian, Russian, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS*

*MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**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) 434-4208*
*Fax: (619) 434-4315*
*After Hours Phone: (619) 434-4208*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 298442*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
*Phone: (619) 434-4208*
*Fax: (619) 434-4315*
*After Hours Phone: (619) 434-4208*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**SHEREV, DIMITRI**
*Provider ID: 268950*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
*Phone: (619) 867-0557*
*Fax: (619) 867-0558*
*After Hours Phone: (619) 867-0557*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 296051*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
*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: 309098*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
865 3RD AVE STE 133
CHULA VISTA, CA 91911
*Phone: (760) 294-0480*
*Fax: (760) 294-0481*
*After Hours Phone: (760) 294-0480*
*Provider Gender: 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: 15\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 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*

# D. Direktoryo ng Provider na Espesyalista

*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*
*Min/Max 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: 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**

# D. Direktoryo ng Provider na Espesyalista

**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*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301823*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
435 H ST
CHULA VISTA, CA 91910
*Phone: (619) 691-7000*
*Fax: (619) 260-7055*
*After Hours Phone: (619) 691-7000*
*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SPEZIALE, MARK**
*Provider ID: 304829*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
435 H ST
CHULA VISTA, CA 91910

*Phone: (619) 691-7000*
*Fax: (619) 260-7055*
*After Hours Phone: (619) 691-7000*
*Provider Gender: Male*
*NPI: 1801978143*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**BALBOA NEPHROLOGY MED GRP INC,**
*Provider ID: 311223*
*IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD*
855 3RD AVE STE 2210
CHULA VISTA, CA 91911
*Phone: (619) 427-1144*
*Fax: (619) 427-1185*
*After Hours Phone: (619) 427-1144*
*NPI: 1316997505*
*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-5PM*
*Website: www.balboacare.com*

**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*

**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*

**NEPHROLOGY**

**HOREISH, ADAM**
*Provider ID: 290100*
*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: 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*

**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 AVESTE 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: 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 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: 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 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: 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, SHARP CORONADO HOSP 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*

**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, 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: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Female*
*NPI: 1922243401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**HOSSEIN ZADEH MALEKI, ANA**
*Provider ID: 304999*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 FOURTH AVESTE 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**

**MANDEVILLE, ROSS**

*Provider ID: 309932*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 425-3840*
*Fax: (619) 425-3842*
*After Hours Phone: (619) 425-3840*
*Provider Gender: Male*
*NPI: 1205084183*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, MAYERS MEMORIAL HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MAREK, MAKSYM**
*Provider ID: 306707*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
450 FOURTH AVESTE 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*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MOHAMMAD, AHMAD SHAH**
*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: 290331*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
*Phone: (619) 482-8406*
*Fax: (619) 482-6656*
*After Hours Phone: (619) 482-8406*
*Provider Gender: Male*
*NPI: 1033138714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 13\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM F 8AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OBSTETRICS / GYNECOLOGY

**ATIGA, SCHUBERT**
*Provider ID: 268953*
*Board Certified Specialty: Yes*
*COMMUNITY CARE IPA LLC*
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
*Phone: (619) 482-8406*
*Fax: (619) 482-6656*
*After Hours Phone: (619) 482-8406*
*Provider Gender: Male*
*NPI: 1033138714*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-5PM F 8AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OCCUPATIONAL THERAPIST

**MORRIS, SHEILA**
*Provider ID: 268926*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1020 TIERRA DEL REY STE A-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

**GOLDMAN, DAVID**

*Provider ID: 308450*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Male*
*NPI: 1629185467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**GOLDMAN, DAVID**
*Provider ID: 308604*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Male*
*NPI: 1629185467*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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*

**OPHTHALMOLOGY**

**SHUMWAY, CALEB**
*Provider ID: 310744*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
311 DEL MAR AVE
CHULA VISTA, CA 91910
*Phone: (619) 427-3355*
*Fax: (619) 427-0955*
*After Hours Phone: (619) 427-3355*
*Provider Gender: Male*
*NPI: 1225698814*
*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*
*Hours: M-TH 8AM-5PM F 8AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**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**

**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**

**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**

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

*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-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*
- *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
- *Accessibility: CONTACT PROVIDER*
- *Hours: M-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*
- *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-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*

*Fax: (866) 254-5707*
- *After Hours Phone: (619) 427-2020*

*Provider Gender: Male*
*NPI: 1457507279*
- *Provider English Spoken: Y*
- *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-6PM*
- *Website: N/A*

*IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD*

**OPTOMETRIST**

# D. Direktoryo ng Provider na Espesyalista

**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**

**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*
*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**

**RICHARDSON, JULIA**
*Provider ID: 297645*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 422-2025*
*After Hours Phone: (619) 422-1471*
*Provider Gender: Female*
*NPI: 1770154528*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**SCOVILL, ALEXANDRA**
*Provider ID: 297625*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 422-0114*
*After Hours Phone: (619) 422-1471*
*Provider Gender: Female*
*NPI: 1184146094*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 310536*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
835 3RD AVE STE A
CHULA VISTA, CA 91911
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**
*Provider ID: 310877*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1053841478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**CHANG, EDWARD**
*Provider ID: 309536*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
577 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 426-5181*
*Fax: (619) 426-0714*
*After Hours Phone: (619) 426-5181*
*Provider Gender: Male*
*NPI: 1528146008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD*

**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 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**

**CRAWFORD, MICHAEL**
*Provider ID: 311161*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**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*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**GORHAM, LAURA**
*Provider ID: 275787*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1316162324*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MENDES, CHANTAL**
*Provider ID: 295669*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
386 E H ST STE 202
CHULA VISTA, CA 91910
*Phone: (858) 966-1720*
*Fax: (858) 966-1725*
*After Hours Phone: (858) 966-1720*
*Provider Gender: Female*
*NPI: 1134681265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 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*
*Provider Language(s) Spoken: Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\17*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICAL MEDICINE / REHABILITATION**

**RICHARDSON, HENRY**
*Provider ID: 295275*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
340 4TH AVE STE 19
CHULA VISTA, CA 91910
*Phone: (760) 607-5350*
*Fax: (760) 607-5365*
*After Hours Phone: (760) 607-5350*
*Provider Gender: Male*
*NPI: 1407052459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**GI, HUNG**
*Provider ID: 302126*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
280 E ST
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1023207404*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, French, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**GUTH, CARA**
*Provider ID: 299110*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
480 4TH AVE STE 501
CHULA VISTA, CA 91910
*Phone: (619) 425-9510*
*Fax: (858) 455-7197*
*After Hours Phone: (619) 425-9510*
*Provider Gender: Female*
*NPI: 1992177182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**
*Provider ID: 309072*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
429 BROADWAY
CHULA VISTA, CA 91910
*Phone: (619) 434-0204*
*Fax: (619) 337-0191*
*After Hours Phone: (619) 434-0204*
*Provider Gender: Female*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**
*Provider ID: 265072*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
450 4TH AVE STE 215
CHULA VISTA, CA 91910
*Phone: (619) 434-0204*
*Fax: (619) 337-0191*
*After Hours Phone: (619) 434-0204*
*Provider Gender: Female*
*NPI: 1679008379*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**MARISCAL, MIGUEL**
*Provider ID: 308408*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 THIRD AVESTE 2200
CHULA VISTA, CA 91911
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1760508923*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**
*Provider ID: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**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: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**VARGAS, CHRISTOPHER**
*Provider ID: 295828*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2452 FENTON ST STE C203
CHULA VISTA, CA 91914
*Phone: (619) 600-5309*
*Fax: (619) 655-4700*
*After Hours Phone: (619) 600-5309*
*Provider Gender: Male*
*NPI: 1922505775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**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) 880-5057*
*Fax: (858) 485-1515*
*After Hours Phone: (619) 880-5057*
*Provider Gender: Male*
*NPI: 1033554324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 308636*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 308211*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
345 F ST STE 100
CHULA VISTA, CA 91910
*Phone: (619) 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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**DAVIDSON III, JOHN**
*Provider ID: 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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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, Rady Childrens Health Network

**PSYCHOLOGIST**

**BAYLON, ALDO**
Provider ID: 290243
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1649429150
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**PSYCHOLOGIST**

**CELAYA, PATRICIA**
Provider ID: 294875
Board Certified Specialty: No
IHP OF SOUTHERN CAL-PHP
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1952656902
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-8PM SA 8AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

**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*

**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: M-F 8AM-5PM SU 10AM-4PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**WIJAYARATNE, IMANIE**
*Provider ID: 290092*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 245-1184*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1932358355*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**RADIATION ONCOLOGY**

**CARMONA, RUBEN**
*Provider ID: 303101*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
*Phone: (858) 939-5010*
*Fax: (619) 740-8499*
*After Hours Phone: (858) 939-5010*
*Provider Gender: Male*
*NPI: 1275929242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIATION ONCOLOGY**

**COLEMAN, LORI**
*Provider ID: 206393*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

*Phone: (619) 502-5851*
*Fax: (619) 502-5865*
*After Hours Phone: (619) 502-5851*
*Provider Gender: Female*
*NPI: 1053348920*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*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**

**CHENG, BRANDON**
*Provider ID: 310337*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1336894724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*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 AVESTE A
CHULA VISTA, CA 91911
*Phone: (619) 205-4585*
*Fax: (619) 271-3183*
*After Hours Phone: (619) 205-4585*
*Provider Gender: Female*
*NPI: 1063170603*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 55\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 299889*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1407440670*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 310382*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1407440670*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*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 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**KARANDE, PRACHI**
*Provider ID: 310746*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1699357525*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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**

**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 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 305013*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 310381*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NGUYEN, TIA**
*Provider ID: 305014*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1457136269*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 310722*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 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 7AM-6PM*
*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 7AM-6PM*
*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 7AM-6PM*
*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
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 301108*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SPARKS, TODD**
*Provider ID: 310371*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1265481139*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\0*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**
*Provider ID: 310409*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*

*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1760194302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**STAHL, KEVIN**
*Provider ID: 305424*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1760194302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**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**

**SUGGS, SARAH**
*Provider ID: 310419*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**VERISSIMO, TAYLOR**
*Provider ID: 310405*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
386 E H ST STE 203
CHULA VISTA, CA 91910
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*

*Provider Gender: Female*
*NPI: 1124871629*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VERISSIMO, TAYLOR**
*Provider ID: 310406*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1124871629*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**
*Provider ID: 301532*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
*Phone: (619) 482-3000*
*Fax: (619) 482-3001*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1063046878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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 8:30AM-5PM*
*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*
*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: 307884*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
333 H ST STE 5000
CHULA VISTA, CA 91910
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SURGERY GENERAL

**CASILLAS BERUMEN, SERGIO**
*Provider ID: 304607*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1111 BROADWAY STE 305
CHULA VISTA, CA 91911
*Phone: (619) 576-7007*
*Fax: (619) 567-7775*
*After Hours Phone: (619) 576-7007*
*Provider Gender: Male*
*NPI: 1437470762*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, 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 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, 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: 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, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

# CORONADO

## CERTIFIED NURSE PRACTITIONER

**LANE, KIMBERLY**
*Provider ID: 301599*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
230 PROSPECT PL STE 210
CORONADO, CA 92118
*Phone: (619) 299-0670*
*Fax: (858) 429-7929*
*After Hours Phone: (619) 299-0670*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*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 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, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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

**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 NURSE PRACTITIONER**

**GARCIA, CATALINA**
*Provider ID: 311391*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Provider Gender: Female*
*NPI: 1659148104*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HAMID, WAHIDA**
*Provider ID: 302295*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1164812293*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Persian, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (619) 445-0707*
*Provider Gender: Male*
*NPI: 1417567827*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**DERMATOLOGY**

**LIN, SHINKO**
*Provider ID: 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*

**GASTROENTEROLOGY**

**CHAVEZ, LUIS**
*Provider ID: 311341*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
*Phone: (619) 416-3510*
*Fax: (619) 243-3216*
*After Hours Phone: (619) 416-3510*
*Provider Gender: Male*
*NPI: 1295224905*
*Provider English Spoken: Y*
*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*
*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: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268692*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1767 E MAIN ST
EL CAJON, CA 92021
*Phone: (619) 440-6516*
*Fax: (619) 440-6547*
*After Hours Phone: (619) 440-6516*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**
*Provider ID: 268650*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1767 E MAIN ST
EL CAJON, CA 92021
*Phone: (619) 440-6516*
*Fax: (619) 440-6547*
*After Hours Phone: (619) 440-6516*
*Provider Gender: Female*
*NPI: 1902853344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERNAL MEDICINE**

**MAY, LOUIS**
*Provider ID: 294916*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1720497514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**MICHAEL, RAMI**
*Provider ID: 294908*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1467871673*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**
*Provider ID: 309247*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1625 E MAIN ST STE 201
EL CAJON, CA 92021
*Phone: (619) 486-6512*
*Fax: (619) 486-6470*
*After Hours Phone: (619) 486-6512*
*Provider Gender: Male*
*NPI: 1831393289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Swahili*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**SHEREV, DIMITRI**
*Provider ID: 302988*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1380 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 867-0557*
*After Hours Phone: (619) 867-0557*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

# D. Direktoryo ng Provider na Espesyalista

**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: 15\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: 309095*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1625 E MAIN ST STE 201
EL CAJON, CA 92021
*Phone: (619) 486-6512*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 486-6512*
*Provider Gender: 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*

## 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*

## 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*

**OPTOMETRIST**

**THACH, QUEEN**

*Provider ID: 310538*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

231 W MAIN ST
EL CAJON, CA 92020

*Phone: (619) 425-7755*

*Fax: (619) 425-2138*

*After Hours Phone: (619) 425-7755*

*Provider Gender: Female*

*NPI: 1053841478*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 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**

**ACOSTA, ANGELICA**

*Provider ID: 310413*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

855 E MADISON AVE
EL CAJON, CA 92020

*Phone: (619) 440-2751*

*Fax: (360) 462-2746*

*After Hours Phone: (619) 440-2751*

*Provider Gender: Female*

*NPI: 1952513517*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**INDA, PRISCILLA**

*Provider ID: 265073*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020

*Phone: (619) 930-9404*

*Fax: (619) 930-9426*

*After Hours Phone: (619) 930-9404*

*Provider Gender: Female*

*NPI: 1679008379*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic, Russian, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

**PHYSICIANS ASSISTANT**

**LE, TAYLOR**

*Provider ID: 304574*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

855 E MADISON AVE
EL CAJON, CA 92020

*Phone: (619) 440-2751*

*Fax: (360) 462-2746*

*After Hours Phone: (619) 440-2751*

*Provider Gender: Female*

*NPI: 1396478400*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**PHYSICIANS ASSISTANT**

**RAMOS, JACQUELYN**
*Provider ID: 301106*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Provider Gender: Female*
*NPI: 1003515131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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: 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*
*Provider Language(s) Spoken: Sign Language*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, 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*
*Provider Language(s) Spoken: Sign Language*
*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-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**WHEELER, KIM**
*Provider ID: 302144*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 785-3356*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1700577434*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 11\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**CAMPA, PATRICIA**
*Provider ID: 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*

**REGISTERED PHYSICAL THERAPIST**

**MORRIS, CHAD**
*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*

# D. Direktoryo ng Provider na Espesyalista

## 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*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

## ANESTHESIOLOGY CRITICAL CARE MEDICINE

**RODRIGUEZ-MINETTE, JESSICA**

*Provider ID: 277410*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1415 ROSS AVE
EL CENTRO, CA 92243

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1164809950*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

## ANESTHESIOLOGY PAIN MANAGEMENT

**BROWNLOW, ROY**

*Provider ID: 308403*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1500 S IMPERIAL AVE
EL CENTRO, CA 92243

*Phone: (760) 206-4105*

*Fax: (760) 610-0523*

*After Hours Phone: (760) 206-4105*

*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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PITTMAN, LILIANA**
*Provider ID: 285963*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1326599002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TABAREZ, NORMA**
*Provider ID: 272979*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (866) 803-2262*
*After Hours Phone: (866) 803-2262*
*Provider Gender: Female*
*NPI: 1538535570*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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: 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*
*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**

**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 HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**RUDOLF, FRANCES**
*Provider ID: 240161*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (760) 339-7000*
*After Hours Phone: (760) 339-7000*
*Provider Gender: Female*
*NPI: 1821487430*
*Provider English Spoken: Y*
*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) 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*
*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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**GOWDA, ASHWIN**
*Provider ID: 277348*
*Board Certified 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, Hindi, Kannada, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, UCSD MEDICAL CTR, HEALDSBURG*

*HOSPITAL, Providence Redwood Memorial Hospital, Providence Redwood Memorial Hospital, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**
*Provider ID: 277391*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1415 ROSS AVE
EL CENTRO, CA 92243
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851682728*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/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

### CARDIOVASCULAR DISEASE

**DURAN, EDWARD**
*Provider ID: 310052*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
477 N EL CAMINO REAL
STE D300
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578903936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CARDIOVASCULAR DISEASE

**RAMSIS, MATTHEUS**
*Provider ID: 310449*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
477 N EL CAMINO REAL
STE D300
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609225135*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CERTIFIED ACUPUNCTURIST

**ARELLANO, JACQUELINE**
*Provider ID: 304139*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CERTIFIED ACUPUNCTURIST

**DISTEFANO, KIMBERLY**
*Provider ID: 311061*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851914220*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

### CERTIFIED ACUPUNCTURIST

**JULIAN, FIDES**
*Provider ID: 304133*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CARDINELL, ANNA**
*Provider ID: 291412*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*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*

**CERTIFIED NURSE PRACTITIONER**

**DWYER, ERIN**
*Provider ID: 301447*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Female*
*NPI: 1003260894*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 268657*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1699078923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301602*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**PAKENHAM, KATE**
*Provider ID: 296268*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1578299343*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-8PM*
*M-F 8AM-8PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SEILNACHT-BERNARD, KAREN**
*Provider ID: 310372*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
*Phone: (616) 361-8292*
*Fax: (940) 478-8378*
*After Hours Phone: (616) 361-8292*
*Provider Gender: Female*
*NPI: 1861562498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

# D. Direktoryo ng Provider na Espesyalista

## ENDOCRINOLOGY METABOLISM DIABETES

**HUPFELD, CHRISTOPHER**

*Provider ID: 277111*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1568429165*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/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

**PATEL, JANKI**

*Provider ID: 305301*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

*Phone: (760) 354-9697*

*Fax: (760) 635-5972*

*After Hours Phone: (760) 354-9697*

*Provider Gender: Female*

*NPI: 1548606668*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Gujarati, Hindi*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

## GYNECOLOGIC ONCOLOGY

**ESKANDER, RAMEZ**

*Provider ID: 282164*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

*Phone: (858) 249-2560*

*Fax: (888) 539-8781*

*After Hours Phone: (858) 249-2560*

*Provider Gender: Male*

*NPI: 1144486929*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, 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

**RUBENZIK, TAMARA**

*Provider ID: 282127*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## HOSPICE AND PALLIATIVE MEDICINE

**RUBENZIK, 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*
*IPA: UCSD Medical Group*

## INTERVENTIONAL CARDIOLOGY

**BLANCHARD, DANIEL**
*Provider ID: 310391*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
477 N EL CAMINO REAL STE D300
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487684155*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## MATERNAL AND FETAL MEDICINE

**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
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 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*
*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*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**
*Provider ID: 303905*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
354 SANTA FE DR
ENCINITAS, CA 92024
*Phone: (760) 633-6120*
*Fax: (760) 633-7385*
*After Hours Phone: (760) 633-6120*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**BUI, JONATHAN**
*Provider ID: 269966*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE 302

ENCINITAS, CA 92024
*Phone: (760) 944-6377*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-6377*
*Provider Gender: Male*
*NPI: 1730247974*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 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*
*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**

**KIMMCMANUS, 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**

**ASHAK, DANI**

*Provider ID: 311188*

*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: 1790149425*

*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**

**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 THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/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**

**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*

**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*

**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: 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): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**
*Provider ID: 208682*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
*Phone: (858) 657-7200*
*After Hours Phone: (858) 657-7200*
*Provider Gender: Female*
*NPI: 1396904876*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MACKAY, GILLIAN**
*Provider ID: 303061*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311111*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**
*Provider ID: 267315*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1104237353*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*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, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 205886*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*

**OPTOMETRIST**

**ZAIDI, NOORINA**
*Provider ID: 310607*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Provider Gender: Female*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 206085*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*

*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**
*Provider ID: 310280*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 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*

## OTOLARYNGOLOGY

**QIAN, ZHEN**
*Provider ID: 311004*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC ALLERGY / IMMUNOLOGY

**GREINER, ALEXANDER**
*Provider ID: 205696*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 966-4900*
*Fax: (760) 944-3927*
*After Hours Phone: (858) 966-4900*
*Provider Gender: Male*
*NPI: 1609801299*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC CARDIOLOGY

**HALEY, JESSICA**
*Provider ID: 205688*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**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*

**PEDIATRIC CARDIOLOGY**

**SILVASEPULVEDA, 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*

**PEDIATRIC ENDOCRINOLOGY**

**RANADIVE, SAYALI**
*Provider ID: 311396*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Direktoryo ng Provider na Espesyalista

**PEDIATRIC GASTROENTEROLOGY**

**CHU, CHRISTOPHER**
*Provider ID: 301641*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1912369273*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Yue Chinese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**DICKERSON, ANDREW**
*Provider ID: 310620*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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 NEPHROLOGY**

**RASCHKE, ROBIN**
*Provider ID: 310302*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Female*
*NPI: 1609365402*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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
*Phone: (760) 944-5545*
*Fax: (760) 944-3927*
*After Hours Phone: (760) 944-5545*
*Provider Gender: Female*
*NPI: 1144615659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**CHANG, JOHANNA**
*Provider ID: 246395*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*After Hours Phone: (760) 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 Network*

**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*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**
*Provider ID: 293443*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386791028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302454*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (760) 944-5545*
*Fax: (760) 944-5545*
*After Hours Phone: (760) 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*

**PHYSICIANS ASSISTANT**

**SUTTON, BRIAN**
*Provider ID: 272241*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
*Phone: (760) 598-1776*
*Fax: (760) 598-5744*
*After Hours Phone: (760) 598-1776*
*Provider Gender: Male*
*NPI: 1629174727*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**VANETSKY, GARY**
*Provider ID: 269152*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
*Phone: (760) 436-2300*
*Fax: (760) 436-5482*
*After Hours Phone: (760) 436-2300*
*Provider Gender: Male*
*NPI: 1417034489*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PODIATRIST**

**DUSTIN, ADAM**
*Provider ID: 275800*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024
*Phone: (760) 436-5533*
*Fax: (760) 436-0611*
*After Hours Phone: (760) 436-5533*
*Provider Gender: Male*
*NPI: 1043389026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**GOMEZ, JUANITA**
*Provider ID: 291423*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**PARRY, LISA**
*Provider ID: 278552*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**ARMANI, AVA**
*Provider ID: 282143*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**JACOBSEN, GARTH**
*Provider ID: 201730*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*Phone: (858) 657-8860*
*After Hours Phone: (858) 657-8860*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**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 PEDIATRIC**

**THOMPSON, KYLE**

*Provider ID: 310987*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

*Phone: (760) 944-5545*

*Fax: (760) 944-3927*

*After Hours Phone: (760) 944-5545*

*Provider Gender: Male*

*NPI: 1598147050*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: French*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*UCSD MEDICAL GROUP*
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
*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*

**UROLOGY**

**MOORE, SARAH**
*Provider ID: 311608*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
*Phone: (760) 436-4558*
*Fax: (858) 429-7926*
*After Hours Phone: (760) 436-4558*
*Provider Gender: Female*
*NPI: 1538620760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## ESCONDIDO

**ANESTHESIOLOGY PAIN MANAGEMENT**

**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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**BROWNLOW, ROY**
*Provider ID: 308401*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**
*Provider ID: 299881*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
*Phone: (760) 738-5533*
*Fax: (760) 738-3835*
*After Hours Phone: (760) 738-5533*
*Provider Gender: Male*
*NPI: 1689092470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**ANESTHESIOLOGY PAIN MANAGEMENT**

**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**

**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*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**BALLOUT, REEM**
*Provider ID: 310193*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Provider Gender: Female*
*NPI: 1780459958*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 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*

**CERTIFIED NURSE PRACTITIONER**

**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: Female*
*NPI: 1063585099*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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: Community Care IPA LLC,*

*IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KESHAVARZI, SARA**
*Provider ID: 309748*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
*Phone: (760) 466-9800*
*Fax: (360) 462-2741*
*After Hours Phone: (760) 466-9800*
*Provider Gender: Female*
*NPI: 1457996126*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**NAVARRO, STEVEN**
*Provider ID: 310223*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
460 N ELM ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8100*
*Fax: (760) 466-1373*
*After Hours Phone: (760) 520-8100*
*Provider Gender: Male*
*NPI: 1013598960*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**WALDRUP, LARHONDA**
*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*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SEILNACHT-BERNARD, KAREN**
*Provider ID: 269203*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
488 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (877) 217-8505*
*Fax: (760) 735-6296*
*After Hours Phone: (877) 217-8505*
*Provider Gender: Female*
*NPI: 1861562498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

# D. Direktoryo ng Provider na Espesyalista

*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
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*
*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**

**MOHAMEDALI, BURHAN**
*Provider ID: 309248*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
- 488 E VALLEY PKWY STE 107 ESCONDIDO, CA 92025
- *Phone: (760) 294-0480*

*Fax: (760) 294-0481*
- *After Hours Phone: (760) 294-0480*

*Provider Gender: Male*
*NPI: 1831393289*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Spanish, Swahili*

*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**SAWHNEY, NAVINDER**
*Provider ID: 304784*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2130 CITRACADO PKWYSTE 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: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 309097*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
*Phone: (760) 294-0480*
*Fax: (619) 616-2104*
*After Hours Phone: (760) 294-0480*
*Provider Gender: 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*

**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*
*Min/Max 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, 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

**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*

## 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**

**KIMMCMANUS, 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*

**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: 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**

**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: 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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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: 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**

**HOFFMAN, MICHAEL**
*Provider ID: 310393*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
*Phone: (760) 466-9800*
*Fax: (360) 462-2741*
*After Hours Phone: (760) 466-9800*
*Provider Gender: Male*
*NPI: 1720047707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ADVENTIST MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**
*Provider ID: 285518*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2125 CITRACADO PKWY STE 210
ESCONDIDO, CA 92029
*Phone: (760) 739-2921*
*Fax: (760) 739-3162*
*After Hours Phone: (760) 739-2921*
*Provider Gender: Female*
*NPI: 1396904876*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**BANSAL, PREETI**
*Provider ID: 277883*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA*

*VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*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*
*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, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 277869*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**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**

**KOO, ANITA**
*Provider ID: 307411*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 307410*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1118 W VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**ZAIDI, NOORINA**

*Provider ID: 310608*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Provider Gender: Female*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 277537*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**
*Provider ID: 310282*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*

**OTOLARYNGOLOGY**

**JIANG, WEN**
*Provider ID: 277860*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1659305753*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**LEUIN, SHELBY**
*Provider ID: 206110*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Female*
*NPI: 1124230909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**PATEL, VIJAY**
*Provider ID: 297038*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**QIAN, ZHEN**
*Provider ID: 311005*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029

*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**DAVIS, CHRISTOPHER**
*Provider ID: 277811*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1760691950*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
*Provider ID: 277867*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
*Provider ID: 205689*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**
*Provider ID: 277846*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1376705707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVASEPULVEDA, 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**

**CRAWFORD, MICHAEL**
*Provider ID: 311162*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**MENDES, CHANTAL**
*Provider ID: 295670*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1134681265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
*Provider ID: 277872*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*

*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TODD, SARAH**
*Provider ID: 302802*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1407299787*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 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 DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 289412*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 739-1543*

*Fax: (760) 294-9274*
*After Hours Phone: (760) 739-1543*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**RANADIVE, SAYALI**
*Provider ID: 311398*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310621*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC RHEUMATOLOGY**

**LEVY, AVIYA**
*Provider ID: 310781*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1144726936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**BENDER STERN, JULIA**
*Provider ID: 311586*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
*Phone: (760) 466-9800*
*Fax: (360) 462-2741*
*After Hours Phone: (760) 466-9800*
*Provider Gender: Female*
*NPI: 1568044691*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\22*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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*

**PHYSICAL MEDICINE / REHABILITATION**

**RICHARDSON, HENRY**
*Provider ID: 295277*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1955 CITRACADO PKWY STE 203
ESCONDIDO, CA 92029

*Phone: (760) 738-5533*
*Fax: (909) 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**

**CAMPBELL, PATRICK**
*Provider ID: 310816*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Provider Gender: Male*
*NPI: 1538917125*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 10\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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
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**

**NCHOTU, SUCCESS**
*Provider ID: 311537*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Provider Gender: Male*
*NPI: 1073157210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**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**

**RODRIGUES, ANNETTE**
*Provider ID: 302456*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 294-9260*
*Fax: (760) 294-9274*
*After Hours Phone: (760) 294-9260*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**WALSH, JOHN**
*Provider ID: 301971*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
*Phone: (760) 743-1431*
*Fax: (760) 743-6455*
*After Hours Phone: (760) 743-1431*

# D. Direktoryo ng Provider na Espesyalista

*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*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1955 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (760) 738-5533*
*Fax: (909) 204-7863*
*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: (360) 462-2745*
*After Hours Phone: (760) 520-8100*
*Provider Gender: Female*
*NPI: 1669842357*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 300882*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
*Phone: (760) 480-1189*
*Fax: (858) 485-1515*
*After Hours Phone: (760) 480-1189*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 296654*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
*Phone: (760) 480-1189*
*Fax: (858) 485-1515*
*After Hours Phone: (760) 480-1189*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PSYCHOLOGIST**

**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): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**VAQUERO, JUANA**
*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*
*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*

**PULMONARY DISEASES**

**QUAN, MICHELE**
*Provider ID: 287097*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
*Phone: (760) 489-1458*
*Fax: (760) 489-1246*
*After Hours Phone: (760) 489-1458*
*Provider Gender: Female*
*NPI: 1629462882*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: REDLANDS COMMUNITY HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*

**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*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**MCGEE, JACQUELINE**
*Provider ID: 252473*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
*Phone: (760) 233-9655*
*Fax: (760) 233-9648*
*After Hours Phone: (760) 233-9655*
*Provider Gender: Female*
*NPI: 1194217133*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 8\None*
*American Sign Language (ASL): 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**

**DURNAN, CASSANDRA**
*Provider ID: 307881*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**
*Provider ID: 304606*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
*Phone: (760) 884-4500*
*Fax: (619) 483-3997*
*After Hours Phone: (760) 884-4500*
*Provider Gender: Male*
*NPI: 1437470762*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, 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 NEUROLOGICAL**

**HATEFI, DUSTIN**
*Provider ID: 310032*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*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*

**SURGERY ORTHOPEDIC**

**EDMONDS, ERIC**
*Provider ID: 277831*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
*Phone: (760) 480-8770*
*Fax: (760) 480-8811*
*After Hours Phone: (760) 480-8770*
*Provider Gender: Male*
*NPI: 1013048412*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**KNUTSON, THOMAS**
*Provider ID: 296851*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2130 CITRACADO 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*

**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*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**
*Provider ID: 310989*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*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**

# D. Direktoryo ng Provider na Espesyalista

**STOJANOVSKA, JOVANA**
*Provider ID: 301367*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Provider Gender: Female*
*NPI: 1215638499*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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 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: 18\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) 457-4700*
*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) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*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*

**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*

**PEDIATRICS**

**SMITH, LINDA**
*Provider ID: 308731*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider Gender: Female*
*NPI: 1881665800*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL 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-5:30PM*
*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

**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*
*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

**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*

## 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*
*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*

## CHIROPRACTOR

**CABALLERO, JAMES**
*Provider ID: 310867*
*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*
*NPI: 1093991549*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: 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: 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 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**JIMENEZ, ANDREA**
*Provider ID: 299890*
*Board Certified 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: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**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) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 286783*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM*
*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-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**
*Provider ID: 301429*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**
*Provider ID: 298365*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1083353650*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**VERISSIMO, TAYLOR**
*Provider ID: 310202*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Female*
*NPI: 1124871629*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**
*Provider ID: 301531*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
*Phone: (619) 482-3000*
*Fax: (619) 332-4220*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1063046878*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 7AM-7PM F 7AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## LA JOLLA

**ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY**

**HONG, KIMBERLY**
*Provider ID: 246312*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346515442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/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**

**CABANISS, SCOTT**
*Provider ID: 311437*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821626714*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CHAN, CHI-BEW**
*Provider ID: 310045*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205966264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS*

*MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**COBLENTZ, IAN**
*Provider ID: 311462*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649730367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CURRAN, BRIAN**
*Provider ID: 239003*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1710373642*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**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**

**GOH, REGINE**
*Provider ID: 311502*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205381316*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**HOSALKAR, HETAL**
*Provider ID: 243370*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861556821*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Gujarati, Hindi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**HYLTON, DIANA**
*Provider ID: 241736*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932527751*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

# D. Direktoryo ng Provider na Espesyalista

**MEYER, MEGAN**
*Provider ID: 239608*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720473044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MOELLENHOFF, MICHAEL**
*Provider ID: 311125*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679584791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**NGUYEN, QUOC SY**
*Provider ID: 242189*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871911644*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**OKAMOTO, VINCENT**
*Provider ID: 245952*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1952338709*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**OSWALD, JESSICA**
*Provider ID: 239601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427315118*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SHAW, SUSANNA**
*Provider ID: 255317*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063685477*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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 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*

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# D. Direktoryo ng Provider na Espesyalista

**ANESTHESIOLOGY**

**TZENG, ERIC**

*Provider ID: 284578*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1801258264*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**WANG, MICHELLE**

*Provider ID: 286139*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1659802965*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**YOUNAN, LAWRENCE**

*Provider ID: 240871*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1922432475*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY CRITICAL CARE MEDICINE**

**KRAUSE, MARTIN**

*Provider ID: 280540*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1417243239*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: German*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/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**

**DAMANI, SAMIR**
*Provider ID: 310637*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9850 GENESEE AVE STE 650
LA JOLLA, CA 92037
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**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**
*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: 304140*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal 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*
*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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# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

*Provider ID: 304136*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104129485*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**

*Provider ID: 311065*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1851914220*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**

*Provider ID: 311066*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1851914220*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**

*Provider ID: 311064*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1851914220*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal 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*

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*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 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 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**

**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*
*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): 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
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851749253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE**

# D. Direktoryo ng Provider na Espesyalista

**PRACTITIONER**

**CAPOZZI, JENNIFER**

*Provider ID: 241030*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1336258276*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNER, PAMELA**

*Provider ID: 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**

**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**

**CONNOR, CAROLINE**

*Provider ID: 279834*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1609081710*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**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: 238922*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7600*
*After Hours Phone: (858) 657-7600*
*Provider Gender: Female*
*NPI: 1679850671*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*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**

**DE DIOS, SARAH JANE**
*Provider ID: 300052*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528632742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DIMAIRA, FRANCESCA**
*Provider ID: 245579*
*Board Certified 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**

**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**

**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*
*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: 268991*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS 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: 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: 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**

**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: 299469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528578713*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal 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*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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**

**HARKNESS, RUMIKO**
*Provider ID: 208840*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1487785093*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**IYER, VICTORIA**
*Provider ID: 265624*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE 2B
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*

**CERTIFIED NURSE PRACTITIONER**

**JONES, CHRISTA**
*Provider ID: 275564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (800) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396371431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**KORMANIK, PATRICIA**
*Provider ID: 282070*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093895047*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301604*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
*Phone: (858) 453-5944*
*Fax: (858) 429-7925*
*After Hours Phone: (858) 453-5944*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MA, XIAOJUAN**
*Provider ID: 311507*
*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: 1861161366*
*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*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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: 299646*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1891061966*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**

*Provider ID: 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: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**MUUS, SUSAN**
*Provider ID: 311127*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295583870*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MUUS, SUSAN**
*Provider ID: 311126*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295583870*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MUUS, SUSAN**
*Provider ID: 311128*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295583870*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal 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*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PAULSON, KERRY**
*Provider ID: 201269*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (619) 543-3000*
*After Hours Phone: (619) 543-3000*
*Provider Gender: Female*
*NPI: 1518363407*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**RALEIGH, DEBORAH**
*Provider ID: 215016*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1689006876*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*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**

**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: 215475*
*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: 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: 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**

**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*

**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*

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# D. Direktoryo ng Provider na Espesyalista

**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*

**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 THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TUCKER, LANIKA**

*Provider ID: 307658*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1477325181*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**YEO, ALEXANDRIA**

*Provider ID: 299942*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1902368319*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal 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 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**

# D. Direktoryo ng Provider na Espesyalista

**FARRIS, AMANDA**
*Provider ID: 311602*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538900154*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FERRITER, STACY**
*Provider ID: 265296*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780725556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/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*
*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**

**LANTRIP, KEATON**

*Provider ID: 311519*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043059686*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**RAMIREZ, NICOLE**
*Provider ID: 291403*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487213500*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SACKS, BRENT**
*Provider ID: 278004*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982133591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SEILNACHT-BERNARD, KAREN**
*Provider ID: 310373*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
*Phone: (616) 361-8292*
*Fax: (970) 478-8378*
*After Hours Phone: (616) 361-8292*
*Provider Gender: Female*
*NPI: 1861562498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**CHOI, NATHALIE**
*Provider ID: 301713*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9300 CAMPUS 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*
*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**

# D. Direktoryo ng Provider na Espesyalista

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

# D. Direktoryo ng Provider na Espesyalista

**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*
*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*
*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**

**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*

**EMERGENCY MEDICINE**

**CHEN, ALICE**
*Provider ID: 287427*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427476597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**CHEN, ALICE**
*Provider ID: 287429*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427476597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**EAGLE, SONJA**
*Provider ID: 311504*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699394114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**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*
*NPI: 1932696093*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SAN GORGONIO MEMORIAL 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*

**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**

**HOGUE, BRENNA**
*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, BRENNA**
*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
*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: 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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LI, JINGHONG**
*Provider ID: 255937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7125*
*Fax: (858) 657-7107*
*After Hours Phone: (858) 657-7125*
*Provider Gender: Female*
*NPI: 1619014479*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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*

**EMERGENCY MEDICINE**

**LIOTTA, BENJAMIN**
*Provider ID: 283150*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1396270278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**LIPPI, MATTHEW**
*Provider ID: 311493*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1932736485*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**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*

**EMERGENCY MEDICINE**

**NOSTE, ERIN**
*Provider ID: 239796*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (858) 249-6800*
*After Hours Phone: (858) 249-6800*
*Provider Gender: Female*
*NPI: 1871732214*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**PARK, JAY**
*Provider ID: 285609*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366478372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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**

**RUDOLF, FRANCES**
*Provider ID: 240160*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7000*
*After Hours Phone: (858) 657-7000*
*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*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-8PM*
*M-F 8AM-5PM*
*SA 8AM-8PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**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*
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YOU, ALAN**

*Provider ID: 269937*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1225425697*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YU, ELAINE**

*Provider ID: 301707*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1528564150*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**YU, ELAINE**

*Provider ID: 299985*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

8910 VILLA LA JOLLA DR STE A
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1528564150*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**DECAMPS, SCARLETT**

*Provider ID: 311512*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1477014611*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**JUANG, PATRICIA**

*Provider ID: 255606*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265695795*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**KULASA, KRISTEN**
*Provider ID: 255623*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 962-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 962-8273*
*Provider Gender: Female*
*NPI: 1932324175*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287778*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*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: 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**

# D. Direktoryo ng Provider na Espesyalista

**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**
*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**

**CHEN, ALICE**
*Provider ID: 207166*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**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: 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*

**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*

**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**

**CARETHERS, JOHN**
*Provider ID: 311110*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518048990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**CARETHERS, JOHN**

*Provider ID: 311108*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8440*
*After Hours Phone: (858) 657-8440*
*Provider Gender: Male*
*NPI: 1518048990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**DAVE, SHRAVAN**
*Provider ID: 270449*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588081814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open 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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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) 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: 283898*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

*CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**SHAH, SHAILJA**
*Provider ID: 283897*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**TSAI, MATTHEW**
*Provider ID: 252369*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285051177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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*
*Provider Gender: Male*
*NPI: 1285051177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**YOUSSEF, FADY**
*Provider ID: 300023*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS 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: 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*

**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*

**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*
*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: 202663*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*

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*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: 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**

**PARK, SOO**
*Provider ID: 257202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1821351198*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**RICHARDSON, ANGELIQUE**
*Provider ID: 215010*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700120102*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**STEWART, TYLER**
*Provider ID: 243920*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699110676*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / ONCOLOGY**

**VU, PETER**
*Provider ID: 272717*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861810830*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / PATHOLOGY**

**WANG, HUAN YOU**
*Provider ID: 247584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1689633729*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEMATOLOGY / PATHOLOGY**

**WANG, HUAN YOU**
*Provider ID: 275792*
*Board Certified Specialty: No*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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) 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: 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**

**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**

**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*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033641816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**LE ROUX, MICHELLE**
*Provider ID: 311568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*
*NPI: 1144808353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## 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

**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

**BARRIOLA RUBARTH, RODRIGO**
*Provider ID: 311571*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1336729979*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BORDIN-WOSK, TALYA**
*Provider ID: 273984*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (760) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (760) 471-9186*
*Provider Gender: Female*
*NPI: 1801184973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BORDIN-WOSK, TALYA**
*Provider ID: 273985*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801184973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**CHENG, GEORGE**
*Provider ID: 247640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316174568*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**DJEKIC, KRISTINA**
*Provider ID: 286669*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**IVANOV, MARGARET**
*Provider ID: 272876*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1326427014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**JABBOUR, MOUSSA**
*Provider ID: 256658*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1255741633*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**KATZ, YISRAEL**
*Provider ID: 272937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730507872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open 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**

**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 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**

**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**

**LAM, MICHAEL**
*Provider ID: 274409*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578974259*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**MAJITHIA, AMIT**
*Provider ID: 255881*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801091459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**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**

**NGUYEN, MICHELLE**

*Provider ID: 311485*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407367618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NOKES, BRANDON**
*Provider ID: 287581*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*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: (619) 543-6397*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-6397*
*Provider Gender: Female*
*NPI: 1073951323*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**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**

# D. Direktoryo ng Provider na Espesyalista

**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**

**SIRIPHAND, CHRISTOPHER**
*Provider ID: 311446*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891258596*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SMITH, CHELSEY**
*Provider ID: 239921*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013264506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**TAYLOR, DAVID**
*Provider ID: 274470*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033572995*
*Provider English 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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**

**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*

*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*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, Los Angeles General Medical Center, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**DEWOLF, SEAN**
*Provider ID: 311454*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518312230*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**HEPOKOSKI, MARK**
*Provider ID: 311547*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1649408790*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**IBRAHIM, ISLAM**
*Provider ID: 311488*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-7125*
*Fax: (858) 822-5338*
*After Hours Phone: (858) 657-7125*
*Provider Gender: Male*
*NPI: 1962586917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, LONG BEACH MEMORIAL MED CTR, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**JOHN, MIRA**
*Provider ID: 311592*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013448588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**KAMDAR, BIREN**
*Provider ID: 311451*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*

*Provider Gender: Male*
*NPI: 1528115417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SANTA MONICA UCLA MED CTR, RONALD REAGAN UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311560*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ODISH, MAZEN**
*Provider ID: 271468*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992141428*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**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**

# D. Direktoryo ng Provider na Espesyalista

**AL KHIAMI, BELAL**
*Provider ID: 275993*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (858) 657-8530*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Male*
*NPI: 1861623506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL**

**CARDIOLOGY**

**BLANCHARD, DANIEL**
*Provider ID: 310390*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1 STE 975
LA JOLLA, CA 92037
*Phone: (858) 657-8530*
*Fax: (858) 657-8814*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Male*
*NPI: 1487684155*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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**

**BUI, QUAN**
*Provider ID: 310077*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831553718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**CRUZ RODRIGUEZ, JOSE**
*Provider ID: 300062*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457770240*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**DAMANI, SAMIR**
*Provider ID: 303097*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 650
LA JOLLA, CA 92037
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, 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: LONG BEACH MEMORIAL MED CTR, 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**

**LACHARITE-ROBERGE, ANNE-SOPHIE**
*Provider ID: 311130*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1285089805*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, JANET**
*Provider ID: 311578*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1922454396*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**SORIA JIMENEZ, CESAR**
*Provider ID: 311092*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851826713*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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: 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**

**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*
*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 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*

**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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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*
*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, 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 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**

**DELROSARIO, 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**

**MATOBA, NANA**
*Provider ID: 297977*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9300 CAMPUS POINT DR STE 8
LA JOLLA, CA 92037
*Phone: (858) 657-7000*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 657-7000*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*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**

**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*

# D. Direktoryo ng Provider na Espesyalista

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**

*Provider ID: 301824*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9888 GENESEE AVE
LA JOLLA, CA 92037

*Phone: (858) 626-4123*

*Fax: (760) 633-7998*

*After Hours Phone: (858) 626-4123*

*Provider Gender: Female*

*NPI: 1003260951*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**PHAM, BETTY**

*Provider ID: 310311*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9300 CAMPUS POINT DR
FL 8
LA JOLLA, CA 92037

*Phone: (858) 249-5800*

*Fax: (858) 249-5839*

*After Hours Phone: (858) 249-5800*

*Provider Gender: Female*

*NPI: 1790217750*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAJTI, ENIKO**

*Provider ID: 206170*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (858) 249-5800*

*Fax: (858) 249-5839*

*After Hours Phone: (858) 249-5800*

*Provider Gender: Female*

*NPI: 1649433103*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\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 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*

## NEPHROLOGY

**RIFKIN, DENA**
*Provider ID: 311022*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578519203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## NEPHROLOGY

**RIFKIN, DENA**
*Provider ID: 311023*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1578519203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SANCHEZ, AMBER**
*Provider ID: 311156*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700963907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SANCHEZ, AMBER**
*Provider ID: 311155*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700963907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SANCHEZ, AMBER**
*Provider ID: 311157*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700963907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**SINGH, PRABHLEEN**
*Provider ID: 311035*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235207234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## NEPHROLOGY

**SINGH, PRABHLEEN**
*Provider ID: 311034*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235207234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## 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

**GHOLIPOUR, TAHA**
*Provider ID: 311497*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801159611*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**
*Provider ID: 246701*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8540*
*After Hours Phone: (858) 657-8540*
*Provider Gender: Male*
*NPI: 1053326710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311187*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KANSAL, LEENA**
*Provider ID: 311522*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (585) 657-8540*
*After Hours Phone: (585) 657-8540*
*Provider Gender: Female*
*NPI: 1871759084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 246264*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**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*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SCHULTE, JESSICA**
*Provider ID: 284819*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (858) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467870576*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SHIH, JERRY**
*Provider ID: 311471*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790774156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**TECOMA, EVELYN**
*Provider ID: 311534*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8540*
*After Hours Phone: (858) 657-8540*
*Provider Gender: Female*
*NPI: 1174556518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**UNG, HOAMENG**
*Provider ID: 311434*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1619438363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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: 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**

**ASHAK, DANI**
*Provider ID: 311195*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311194*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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**

**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**

**DELCORE, LAURA**
*Provider ID: 291323*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790128759*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**
*Provider ID: 291324*
*Board Certified Specialty: No*

*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**

**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**

**DRIEBE, AMY**
*Provider ID: 291335*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FERRANDO, CECILE**
*Provider ID: 311106*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255592325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FERRANDO, CECILE**
*Provider ID: 311104*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*

*NPI: 1255592325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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: 278918*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457662868*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**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**

**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)*

**OBSTETRICS / GYNECOLOGY**

*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: 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**

**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**

**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: 303062*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**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**

**MCKINNEY, SARA**
*Provider ID: 311118*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311117*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**

*Provider ID: 285739*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-8745*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8745*
*Provider Gender: Female*
*NPI: 1467585521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**
*Provider ID: 285740*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467585521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**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: 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**

**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*
*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 AVESTE 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*
*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*

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9300 CAMPUS 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: 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*

**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*

**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*
*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**

**LIPARI, RACHEL**

*Provider ID: 311102*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1578129904*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**MUNCADA, CAESAR**

*Provider ID: 288724*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1790268100*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**PARKER, LESLIE**

*Provider ID: 311354*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1053143875*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*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*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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**

**MOVAGHAR, MANSOOR**
*Provider ID: 215055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**
*Provider ID: 311101*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174152961*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**
*Provider ID: 311100*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174152961*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**PUIG LLANO, MANUEL**
*Provider ID: 299965*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1427102979*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-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*
*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*
*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: 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

**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*

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*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**HOO, PAMELA**

*Provider ID: 269621*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (858) 534-6290*

*Fax: (858) 822-4438*

*After Hours Phone: (858) 534-6290*

*Provider Gender: Female*

*NPI: 1275566010*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

**OPTOMETRIST**

**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**

**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**

**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*
*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: 201311*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*After Hours Phone: (858) 534-6290*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**VO, ANDREW**
*Provider ID: 304148*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-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: 301681*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 258078*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299458*
*Board Certified 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**

**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: 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: 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**

**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: 299584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*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**

**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**

**DECONDE, ADAM**
*Provider ID: 299564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 299566*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 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**

# D. Direktoryo ng Provider na Espesyalista

**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**

**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*
*Provider Language(s) Spoken: Spanish*
*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*
*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*
*Provider Language(s) Spoken: Spanish*
*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*
*Provider Language(s) Spoken: Spanish*
*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: 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*
*NPI: 1982708558*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*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*

# D. Direktoryo ng Provider na Espesyalista

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**

*Provider ID: 299558*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1003825571*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**

*Provider ID: 299557*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1003825571*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

**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: 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*

**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*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**
*Provider ID: 299577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**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*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**
*Provider ID: 299574*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**
*Provider ID: 299573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**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: 299512*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299513*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HUSSEMAN, JACOB**
*Provider ID: 301051*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124034053*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 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\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 294828*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 857-8590*
*After Hours Phone: (858) 857-8590*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH 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: 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: 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): 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**

**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*

**OTOLARYNGOLOGY**

**MAGIT, ANTHONY**
*Provider ID: 299478*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891858379*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*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: 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*

**OTOLARYNGOLOGY**

**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*
*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: 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: 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**

**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: 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**

**STABENAU, KALEIGH**
*Provider ID: 311588*
*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: Female*
*NPI: 1952806788*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299510*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS 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*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299504*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6197*
*After Hours Phone: (858) 822-6197*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*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*
*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: 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**

**WEISSBROD, PHILIP**
*Provider ID: 299612*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1366590853*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WEISSBROD, PHILIP**
*Provider ID: 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 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: 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**

**YAN, CAROL**
*Provider ID: 298415*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619237260*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**OTOLARYNGOLOGY**

**YAN, CAROL**

*Provider ID: 298416*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1619237260*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**

*Provider ID: 242138*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR STE LLA
LA JOLLA, CA 92037

*Phone: (858) 657-8590*

*After Hours Phone: (858) 657-8590*

*Provider Gender: Female*

*NPI: 1619237260*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**YAN, CAROL**

*Provider ID: 298411*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1619237260*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**FADARE, OLUWOLE**

*Provider ID: 275706*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1619955804*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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): 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS 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*
*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 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) 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*

# D. Direktoryo ng Provider na Espesyalista

**PATHOLOGY ANATOMIC CLINICAL**

**ZARE, SOMAYE**

*Provider ID: 275814*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1700334802*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ZARE, SOMAYE**

*Provider ID: 203172*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1700334802*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Farsi*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**ZHANG, HAIYAN**

*Provider ID: 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 ANATOMIC CLINICAL**

**ZHANG, HAIYAN**

*Provider ID: 203176*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1457617110*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD 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*

**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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/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**

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

**PHYSICIANS ASSISTANT**

**DEMOOR, PATRICIA**
*Provider ID: 212879*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477721702*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**GEBAUER, HEATHER**
*Provider ID: 311551*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467987586*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HASEGAWA, CHRIS**
*Provider ID: 247205*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225698962*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

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

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287136*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287135*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

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

**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**

**LEE, JENNIFER**
*Provider ID: 309997*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265081871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LEE, JENNIFER**
*Provider ID: 309996*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR

LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265081871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LIN, JOYCE**
*Provider ID: 265147*
*Board Certified 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: 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**

**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*
*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*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1104371251*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MERRILL, COREY**
*Provider ID: 258039*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386032308*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-7967*
*Fax: (858) 822-6395*
*After Hours Phone: (858)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

*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: 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*

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# D. Direktoryo ng Provider na Espesyalista

**PHYSICIANS ASSISTANT**

**ROBERTS, AUDREY**
*Provider ID: 253254*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 543-5540*
*After Hours Phone: (619) 543-5540*
*Provider Gender: Female*
*NPI: 1265960256*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**ROMO, JORGE**
*Provider ID: 309983*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275962383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-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**

**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*

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# D. Direktoryo ng Provider na Espesyalista

**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*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**

*Provider ID: 311090*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1811069271*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-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**

**WAHLIN, TAMARA**

*Provider ID: 299596*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800)*

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*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**

**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: 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*

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*THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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**

**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**

**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: 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**

**DUARTE, KRISTEN**
*Provider ID: 255479*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**EGAN, KAITLYN**
*Provider ID: 311171*
*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: 1629653860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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: 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*
*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**

**MENDEZ, ANDRES**
*Provider ID: 279058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841482692*

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*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: 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**

**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**

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

# D. Direktoryo ng Provider na Espesyalista

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**THOMAS, KELSEY**
*Provider ID: 310060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**THOMAS, KELSEY**
*Provider ID: 311589*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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 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*

## RADIATION ONCOLOGY

**LUI, ASONA**
*Provider ID: 311439*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104487446*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

## RADIATION ONCOLOGY

**LUI, ASONA**
*Provider ID: 311440*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
3960 HEALTH SCIENCES DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104487446*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ADAMS, STEPHEN**
*Provider ID: 311198*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1376689778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**AWWAD, REEM**
*Provider ID: 311086*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811158967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Medi-Cal Open 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**

**BISSET, LOGAN**
*Provider ID: 311145*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356760276*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BONE, SAMUEL**
*Provider ID: 311167*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841216306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BRANCH, CODY**
*Provider ID: 283676*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851770622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BROWN, TERESA**
*Provider ID: 311081*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669492237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARLSON, BLAKE**
*Provider ID: 311136*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548249956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Eisenhower Medical Center*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 303056*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**
*Provider ID: 283227*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GERST, SCOTT**
*Provider ID: 311149*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184602872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311596*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311597*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GRISSOM, MURRAY**
*Provider ID: 271568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720465396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANNSUN, GEMMY**
*Provider ID: 282790*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992120026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Khmer, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANSCH, ERNST**
*Provider ID: 311122*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366428351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HELMY, MARWAH**
*Provider ID: 311097*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841276730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, REGIONAL MEDICAL CTR OF SAN JOSE, MARK TWAIN 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**

**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
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**

**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**
*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**

**RICKMAN, CHRISTOPHER**
*Provider ID: 311170*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497759898*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital, SUTTER COAST HOSPITAL, SUTTER LAKESIDE HOSP, SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ, MEMORIAL HOSPITAL MED CTR, EISENHOWER MEDICAL CTR, Alameda Hospital, Alameda Hospital, Highland Hospital, SAN LEANDRO HOSPITAL, SAN LEANDRO*

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

**RADIOLOGY DIAGNOSTIC**

**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**

**ROZELL, JOSEPH**
*Provider ID: 311180*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1629368519*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open 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*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**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**

**STEPENOSKY, JAMES**

*Provider ID: 309704*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1598738577*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**

*Provider ID: 311563*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (858) 657-6641*
*After Hours Phone: (858) 657-6641*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311566*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 240406*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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**

**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**

**VAHDAT, NOUSHIN**
*Provider ID: 300069*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396700852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*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, UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED DIETITIAN / NUTRITIONIST**

**SIEVERING, DENISE**
*Provider ID: 268249*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1356478929*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BALL, STEPHEN**
*Provider ID: 311014*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437644044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BERGERON, PATRICK**
*Provider ID: 206533*
*Board Certified 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*
*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*

**REGISTERED PHYSICAL THERAPIST**

**BOEHMER, ALEXANDRA**

*Provider ID: 311059*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1528789856*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**

*Provider ID: 246021*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1780018416*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*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*

**REGISTERED PHYSICAL THERAPIST**

**CHIEN, PEI**

*Provider ID: 258324*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1891260238*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Chinese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**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*

**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*

**REGISTERED PHYSICAL THERAPIST**

**RUDD, CHRISTOPHER**

*Provider ID: 258372*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

*Phone: (855) 543-0333*

*Fax: (858) 657-6873*

*After Hours Phone: (855) 543-0333*

*Provider Gender: Male*

*NPI: 1831539337*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**RUDD, CHRISTOPHER**

*Provider ID: 207559*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1831539337*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**SKINNER, NICOLE**
*Provider ID: 206546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386964997*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**TRIMM, CASSIDY**
*Provider ID: 258442*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Male*
*NPI: 1740708478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**TRIMM, CASSIDY**
*Provider ID: 258443*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
*Phone: (855) 543-0333*
*Fax: (858) 657-6873*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Male*
*NPI: 1740708478*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**VASQUEZ, BENJAMIN**
*Provider ID: 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*

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# D. Direktoryo ng Provider na Espesyalista

*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: 200968*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1568938413*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**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: 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**

**SCHIEDERMAYER, BENJAMIN**
*Provider ID: 288939*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164979837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**LOPEZ, NICOLE**
*Provider ID: 286388*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6100*
*After Hours Phone: (858) 822-6100*
*Provider Gender: Female*
*NPI: 1518163005*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**PARRY, LISA**
*Provider ID: 278551*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/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*

**SURGERY CRITICAL CARE**

# D. Direktoryo ng Provider na Espesyalista

**POTENZA, BRUCE**
*Provider ID: 277299*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 543-7200*
*After Hours Phone: (619) 543-7200*
*Provider Gender: Male*
*NPI: 1548281496*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## SURGERY CRITICAL CARE

**VENTRO, GEORGE**
*Provider ID: 284419*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548604648*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/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: 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*
*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: 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*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**ARMANI, AVA**
*Provider ID: 282142*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (858) 822-6100*
*After Hours Phone: (858) 822-6100*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**CLARY, BRYAN**
*Provider ID: 202568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982787131*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HOLLANDSWORTH, HANNAH**
*Provider ID: 310728*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1972954303*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HORGAN, SANTIAGO**
*Provider ID: 286380*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 471-0755*
*After Hours Phone: (619) 471-0755*
*Provider Gender: Male*
*NPI: 1932297231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

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*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**JACOBSEN, GARTH**
*Provider ID: 201728*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (619) 471-0755*
*After Hours Phone: (619) 471-0755*
*Provider Gender: Male*
*NPI: 1265649966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANTORELLI, JARRETT**
*Provider ID: 272304*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033529201*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SIMEONE, DIANE**
*Provider ID: 311176*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1215038138*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL VASCULAR**

**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**

**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**

**GAFFEY, ANN**
*Provider ID: 287012*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1316232010*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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: 284936*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578058665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY 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 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 THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**HATEFI, DUSTIN**
*Provider ID: 310034*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**KHANNA, ARJUN**
*Provider ID: 311543*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780079954*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**KHANNA, ARJUN**
*Provider ID: 311542*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1780079954*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MARSHALL, LAWRENCE**
*Provider ID: 244149*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1750306171*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**
*Provider ID: 299994*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1710371273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**
*Provider ID: 299995*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (619) 543-5540*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-5540*
*Provider Gender: Male*
*NPI: 1710371273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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*
*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) 455-9942*
*Fax: (858) 455-6473*
*After Hours Phone: (858) 455-9942*
*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, 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: IHP of Southern Cal-PHP*

## 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 THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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**

**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**

**GOEB, YANNICK**
*Provider ID: 284793*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1730542747*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311582*
*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: 1083842371*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311581*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083842371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*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, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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, 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*
*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: 274297*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (858) 647-8817*
*Fax: (858) 853-9878*
*After Hours Phone: (858) 647-8817*
*Provider Gender: Male*
*NPI: 1033683719*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/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*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**POLLEMA, TRAVIS**
*Provider ID: 210576*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871752956*

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**RAMIREZ, ALFREDO**
*Provider ID: 256390*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1003829417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**ZANDER, ASHLEY**
*Provider ID: 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: 291381*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780940031*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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*

**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**

**GRIFFITHS, LUKE**
*Provider ID: 311498*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1760945836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MOORE, SARAH**
*Provider ID: 311609*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
*Phone: (858) 453-5944*
*Fax: (858) 429-7925*
*After Hours Phone: (858) 453-5944*
*Provider Gender: Female*
*NPI: 1538620760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## LA MESA

**CARDIOVASCULAR DISEASE**

**KOTHA, PURUSHOTHAM**
*Provider ID: 32053*
*Board Certified Specialty: Yes*
*PURUSHOTHAM AND AKTHER KOTHA MD INC*
8860 CENTER DR STE 400
LA MESA, CA 91942
*Phone: (619) 229-1995*
*Fax: (619) 229-1109*
*After Hours Phone: (619) 229-1995*
*Provider Gender: Male*
*NPI: 1093730814*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CARDIOVASCULAR DISEASE**

**REDDY, REDDIWANDLA**
*Provider ID: 265393*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
5565 GROSSMONT CENTER DR STE 202
LA MESA, CA 91942
*Phone: (619) 461-6130*
*Fax: (619) 461-3108*
*After Hours Phone: (619) 461-6130*
*Provider Gender: Male*
*NPI: 1710996384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Kannada, Spanish, Telugu*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**CARDIOVASCULAR DISEASE**

**SHEREV, DIMITRI**
*Provider ID: 290704*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8851 CENTER DR STE 304
LA MESA, CA 91942
*Phone: (619) 867-0557*
*Fax: (619) 867-0558*
*After Hours Phone: (619) 867-0557*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 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: 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**

**RESTELLI, 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*

**CERTIFIED NURSE PRACTITIONER**

**RESTELLI, 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*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**
*Provider ID: 268693*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5565 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 589-5414*
*Fax: (619) 589-7391*
*After Hours Phone: (619) 589-5414*
*Provider Gender: Female*
*NPI: 1063558856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**HOSPITALIST MD/DO**

**KUPELIAN, CHLOE**
*Provider ID: 310786*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-6000*
*Fax: (619) 740-4885*
*After Hours Phone: (619) 740-6000*
*Provider Gender: Female*
*NPI: 1780013748*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**TAGHIZADEH, BEHZAD**

*Provider ID: 269161*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

8851 CENTER DR STE 405
LA MESA, CA 91942

*Phone: (619) 582-2404*

*Fax: (619) 582-2915*

*After Hours Phone: (619) 582-2404*

*Provider Gender: Male*

*NPI: 1275514986*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*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, USC Arcadia Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

**MATERNAL AND FETAL MEDICINE**

**ADAMI, REBECCA**

*Provider ID: 272676*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

5555 GROSSMONT CENTER DR
LA MESA, CA 91942

*Phone: (858) 966-6710*

*Fax: (858) 966-6711*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Female*

*NPI: 1992149447*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max 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*
*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: 294654*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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**

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**
*Provider ID: 277305*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Male*
*NPI: 1477563302*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**MOHAMMAD, AHMAD SHAH**
*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 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**

**BARNARD, LUKE**
*Provider ID: 310548*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Provider Gender: Male*
*NPI: 1710543111*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**HUDSON, HENRY**
*Provider ID: 297577*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (626) 206-0633*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 206-0633*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**OPHTHALMOLOGY**

**HUDSON, HENRY**
*Provider ID: 297578*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
*Phone: (626) 412-4040*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 412-4040*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp*

*Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

*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*

*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## OPHTHALMOLOGY

**HUDSON, HENRY**
*Provider ID: 306768*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
*Phone: (626) 206-0633*
*Fax: (760) 267-9160*
*After Hours Phone: (626) 206-0633*
*Provider Gender: Male*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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*

## 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*

## 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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## 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*

## 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*
*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

**RAYMOND, ALAIN**
*Provider ID: 269057*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
8851 CENTER DR STE 505
LA MESA, CA 91942
*Phone: (619) 461-3880*
*Fax: (619) 461-3895*
*After Hours Phone: (619) 461-3880*
*Provider Gender: Male*
*NPI: 1164729125*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Haitian Creole*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Community Care IPA LLC*

## PHYSICIANS ASSISTANT

**WHITE, KYLE**
*Provider ID: 302382*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
*Phone: (619) 464-3353*
*Fax: (619) 464-7509*
*After Hours Phone: (619) 464-3353*
*Provider Gender: Male*
*NPI: 1922768860*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 308213*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5565 GROSSMONT CENTER DR STE 510
LA MESA, CA 91942
*Phone: (619) 303-7130*
*Fax: (619) 303-7150*
*After Hours Phone: (619) 303-7130*
*Provider Gender: Male*
*NPI: 1396230298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 308638*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5565 GROSSMONT CENTER DR STE 510
LA MESA, CA 91942
*Phone: (619) 303-7130*
*Fax: (619) 303-7150*
*After Hours Phone: (619) 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*

**RADIATION ONCOLOGY**

**CARMONA, RUBEN**
*Provider ID: 303099*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-4500*
*Fax: (619) 740-8499*
*After Hours Phone: (619) 740-4500*
*Provider Gender: Male*
*NPI: 1275929242*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RADIATION ONCOLOGY**

**COLEMAN, LORI**
*Provider ID: 221089*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
*Phone: (619) 740-4500*
*Fax: (619) 740-8499*
*After Hours Phone: (619) 740-4500*
*Provider Gender: Female*
*NPI: 1053348920*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 19\100*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**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 GENERAL VASCULAR**

**TERRAMANI, THOMAS**
*Provider ID: 311620*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8860 CENTER DR STE 450
LA MESA, CA 91942
*Phone: (619) 460-6200*
*Fax: (619) 460-6262*
*After Hours Phone: (619) 460-6200*
*Provider Gender: Male*
*NPI: 1447344338*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, Sharp Grossmont Hospital, SCRIPPS MEMORIAL HOSPITAL, TRI CITY 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 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY ORTHOPEDIC**

**BALLARD, BROOKE**
*Provider ID: 262205*
*Board Certified Specialty: No*

*IMPERIAL HEALTH HOLDINGS 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: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Imperial Health Holdings Medical Group-SD*

## LAKE ELSINORE

### OPTOMETRIST

**GEE, JENNIFER**
*Provider ID: 290211*
*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: 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

**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*
*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) 252-2720*
*Fax: (760) 414-3892*
*After Hours Phone: (951) 252-2720*
*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

**HOURIHAN, KEITH**
*Provider ID: 257549*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
10039 VINE ST
LAKESIDE, CA 92040
*Phone: (619) 390-9975*
*Fax: (858) 633-4690*
*After Hours Phone: (619) 390-9975*
*Provider Gender: Male*
*NPI: 1306916994*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

## LOS ANGELES

### 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

### 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*
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**

**MIRACLE, ANGELYN**
*Provider ID: 300259*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 200
MURRIETA, CA 92562
*Phone: (951) 461-9300*
*Fax: (951) 461-9399*
*After Hours Phone: (951) 461-9300*
*Provider Gender: Female*
*NPI: 1144539842*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8:30AM-12PM*
*M-F 8AM-5PM*
*SA 8:30AM-12PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**CERTIFIED NURSE PRACTITIONER**

**SNYDER, MICHELLE**
*Provider ID: 210676*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851561054*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**STEVENSON, REHEIA**
*Provider ID: 210794*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1346696044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SYED-UDDIN, SUMIYAH**
*Provider ID: 297771*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1225606478*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*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**

**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*
*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*

**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*

**INTERVENTIONAL CARDIOLOGY**

**AL KHIAMI, BELAL**
*Provider ID: 275994*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
28062 BAXTER RD
MURRIETA, CA 92563
*Phone: (951) 290-4000*
*Fax: (888) 539-8781*
*After Hours Phone: (951) 290-4000*
*Provider Gender: Male*
*NPI: 1861623506*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA*

*JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL 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: 296992*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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**

**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*

**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*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301820*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6000*
*Fax: (951) 696-6105*
*After Hours Phone: (951) 696-6000*
*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Direktoryo ng Provider na Espesyalista

**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*
*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): 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*

# D. Direktoryo ng Provider na Espesyalista

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**KIMMCMANUS, 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*

# D. Direktoryo ng Provider na Espesyalista

**OBSTETRICS / GYNECOLOGY**

**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*

**OPHTHALMOLOGY**

**BANSAL, PREETI**
*Provider ID: 215606*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**
*Provider ID: 267317*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*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, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 215685*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**FRANK, ETHAN**
*Provider ID: 310279*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*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: 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 HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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**

**PATEL, VIJAY**
*Provider ID: 297034*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**QIAN, ZHEN**
*Provider ID: 311003*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**SILVASEPULVEDA, 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**

**ALAYARI, AMETHYST**

*Provider ID: 311383*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6161*
*Provider Gender: Female*
*NPI: 1740778653*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DEVERA, GEMMIE**
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6124*
*After Hours Phone: (951) 696-6124*
*Provider Gender: Female*
*NPI: 1366622078*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY**

# D. Direktoryo ng Provider na Espesyalista

**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*
*Provider Language(s) Spoken: Gujarati*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**
*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*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

*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 EMERGENCY MEDICINE

**VEGA, CAROLINA**
*Provider ID: 309972*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
*Phone: (951) 696-6161*
*Fax: (951) 696-6293*
*After Hours Phone: (951) 696-6161*
*Provider Gender: Female*
*NPI: 1427442086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*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

**RANADIVE, SAYALI**
*Provider ID: 311395*
*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: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 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 GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310618*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**JAZAYERI, AMIR**
*Provider ID: 310953*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1316385925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**RASCHKE, ROBIN**
*Provider ID: 310301*
*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Female*
*NPI: 1609365402*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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*

# D. Direktoryo ng Provider na Espesyalista

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**NGO, MAI**
*Provider ID: 302112*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1508910787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**PATTERSON, MARY**
*Provider ID: 215677*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1912112020*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**VARGASTRUJILLO, 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 CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**
*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**

**RODRIGUES, ANNETTE**
*Provider ID: 302453*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\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*
*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) 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*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**
*Provider ID: 310986*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
*Phone: (951) 600-1640*
*Fax: (951) 600-1760*
*After Hours Phone: (951) 600-1640*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY THORACIC**

**HOWE, STEVEN**
*Provider ID: 210169*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497702740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY THORACIC**

**POLLEMA, TRAVIS**
*Provider ID: 210577*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
*Phone: (858) 657-7777*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-7777*
*Provider Gender: Male*
*NPI: 1871752956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## NATIONAL CITY

### CARDIOVASCULAR DISEASE

**DAMANI, SAMIR**
*Provider ID: 310638*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
*Phone: (858) 800-2480*
*Fax: (858) 216-1908*
*After Hours Phone: (858) 800-2480*
*Provider Gender: Male*
*NPI: 1457379372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

### CERTIFIED NURSE PRACTITIONER

**CUNNINGHAM, ISIS**
*Provider ID: 302115*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
*Phone: (619) 470-1945*
*Fax: (619) 475-5048*
*After Hours Phone: (619) 470-1945*
*Provider Gender: Female*
*NPI: 1770124927*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: 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

**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*

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**

*Provider ID: 294308*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

*Phone: (844) 200-2426*

*Fax: (619) 474-3919*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1093130395*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MCCULLOUGH, LYAN**

*Provider ID: 310623*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

*Phone: (844) 200-2426*

*Fax: (619) 356-2726*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1063759181*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8AM-6PM F 8AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**MIDORO, ABEGAILLE**

*Provider ID: 303830*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950

*Phone: (844) 200-2426*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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: Arabic, Spanish, 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
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: 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*

**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*

## FAMILY PRACTICE

**NAVARRO, VANESSA MARIA**
*Provider ID: 301784*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## FAMILY PRACTICE

**ROBERTS, POMAI**
*Provider ID: 301278*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1136 D AVE
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 336-2323*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1023278314*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## INTERNAL MEDICINE

**THAYER, KARISA**
*Provider ID: 310229*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
330 E 8TH ST
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 529-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1558765941*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

# D. Direktoryo ng Provider na Espesyalista

**INTERVENTIONAL CARDIOLOGY**

**CAMACHO, BENJAMIN**
*Provider ID: 269129*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 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: 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, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-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*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**PANDHI, JAY**
*Provider ID: 269087*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
*Phone: (619) 512-1915*
*Fax: (619) 512-1913*
*After Hours Phone: (619) 512-1915*
*Provider Gender: Male*
*NPI: 1407997406*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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*
*Medi-Cal Open 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, 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, SCRIPPS MERCY HOSPITAL, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## OBSTETRICS / GYNECOLOGY

**DELROSARIO, 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**

**DELROSARIO, GELEN**
*Provider ID: 269247*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
*Phone: (619) 475-1261*
*Fax: (619) 475-1267*
*After Hours Phone: (619) 475-1261*
*Provider Gender: Female*
*NPI: 1255643474*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC, Rady Childrens Health Network*

**OBSTETRICS / GYNECOLOGY**

**DELROSARIO, 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**

**WINESBURG, JENNIFER**
*Provider ID: 302451*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950
*Phone: (619) 662-4100*
*Fax: (619) 259-2807*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1811162456*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OPHTHALMOLOGY**

**BARNARD, LUKE**
*Provider ID: 310549*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Provider Gender: Male*
*NPI: 1710543111*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: 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*
*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*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 306903*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 425-7755*
*Fax: (619) 425-2138*
*After Hours Phone: (619) 425-7755*
*Provider Gender: Female*
*NPI: 1669825667*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**
*Provider ID: 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*

*IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KOO, ANITA**

*Provider ID: 307113*

*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*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**THACH, QUEEN**

*Provider ID: 310537*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

*Phone: (619) 425-7755*

*Fax: (619) 425-2138*

*After Hours Phone: (619) 425-7755*

*Provider Gender: Female*

*NPI: 1053841478*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**ATMAR, AKMAL**

*Provider ID: 269784*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

*Phone: (929) 287-4511*

*Fax: (877) 671-6835*

*After Hours Phone: (929) 287-4511*

*Provider Gender: Male*

*NPI: 1558656637*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

*Hospital Affiliation: PARADISE VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**PODIATRIST**

**CAINE, SAMUEL**

*Provider ID: 308637*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
*Phone: (619) 292-2493*
*Fax: (619) 618-0222*
*After Hours Phone: (619) 292-2493*
*Provider Gender: Male*
*NPI: 1396230298*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PODIATRIST**

**CAINE, SAMUEL**
*Provider ID: 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, IHP of Southern Cal-PHP*

**PODIATRIST**

**DAVIDSON III, JOHN**
*Provider ID: 129542*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
*Phone: (619) 427-3481*
*Fax: (619) 420-7807*
*After Hours Phone: (619) 427-3481*
*Provider Gender: Male*
*NPI: 1689069874*
*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*
*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*
*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 7AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**NOVENCIDO, ANDREW**
*Provider ID: 286784*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
*Phone: (619) 482-3000*
*Fax: (619) 695-0050*
*After Hours Phone: (619) 482-3000*
*Provider Gender: Male*
*NPI: 1447723937*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-6PM*
*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-12PM*
*W-TH 7AM-7PM*
*F 7AM-12PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SUGGS, SARAH**

*Provider ID: 301430*

*Board Certified 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**

**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**

**VILLANUEVA, GIOVANNI**

*Provider ID: 301533*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

*Phone: (619) 482-3000*

*Fax: (619) 695-0050*

*After Hours Phone: (619) 482-3000*

*Provider Gender: Male*

*NPI: 1063046878*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## OCEANSIDE

### ANESTHESIOLOGY PAIN MANAGEMENT

**BROWNLOW, ROY**
*Provider ID: 308400*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
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: Community Care IPA LLC, IHP of Southern Cal-PHP*

### 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: Community Care IPA LLC, 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

**DUFFIELD, GARY**

# D. Direktoryo ng Provider na Espesyalista

*Provider ID: 310927*
*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: 1306428131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, 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**

**APRIL, MONIQUE**
*Provider ID: 306979*
*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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**BINETTE, DONYA**
*Provider ID: 303861*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-8740*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1427325166*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: 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**

**CHEN, KATIE**
*Provider ID: 311621*
*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: Female*
*NPI: 1528714011*
*Provider English Spoken: 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*
*F 8AM-12PM*
*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-5PM*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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**

**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) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1578220612*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**GENOVESE, KELLY**
*Provider ID: 301304*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1326052457*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 268660*
*Board Certified 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**

**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: 310480*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 304494*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013668680*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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: 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**

**HUERTA, STEVEN**
*Provider ID: 311300*
*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: 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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 311298*
*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: 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: Community Care IPA LLC, IHP of Southern Cal-PHP*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**

*Provider ID: 311301*

*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: 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: Community Care IPA LLC, 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: 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: Community Care IPA LLC, 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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

# D. Direktoryo ng Provider na Espesyalista

**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): 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: 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): 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: 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*
*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*
*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**

**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 JR, KEITH**
*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**

**MONTGOMERY JR, KEITH**
*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 JR, KEITH**
*Provider ID: 295287*
*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**

**NIBBELINK AHEARN, SANDRA**
*Provider ID: 310107*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760)*

*967-9900*
*Provider Gender: Female*
*NPI: 1326513441*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PRITZKER, JOELY**
*Provider ID: 239772*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619384351*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**RAYTA, NICOLE**
*Provider ID: 304682*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1689027542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SANACORA, RACHEL**
*Provider ID: 297730*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1548987985*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: 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**

**SANTIAGO, AMANDA**
*Provider ID: 242607*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4700 N RIVER RD
OCEANSIDE, CA 92057

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619488731*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**
*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-5PM 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-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**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-5PM 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) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1801134275*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**PERLMAN, TAMARA**
*Provider ID: 290733*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1730274374*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**ANDREWS, BRAD**
*Provider ID: 290542*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1750791745*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**JU, NATHANIEL**
*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*

**DERMATOLOGY**

**BROWN, REGINA**
*Provider ID: 309981*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*

# D. Direktoryo ng Provider na Espesyalista

3629 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 757-7546*
*Fax: (760) 828-9138*
*After Hours Phone: (760) 757-7546*
*Provider Gender: Female*
*NPI: 1801424692*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## EMERGENCY MEDICINE

**PHAM, LILY**
*Provider ID: 304934*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1811423072*
*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*

## FAMILY PRACTICE

**SALAMANCA, OMAR**
*Provider ID: 295469*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1083000947*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GASTROENTEROLOGY

**NOVO, MEGAN**
*Provider ID: 308044*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3923 WARING RD STE A
OCEANSIDE, CA 92056
*Phone: (760) 724-8782*
*Fax: (760) 842-7801*
*After Hours Phone: (760) 724-8782*
*Provider Gender: Female*
*NPI: 1770961971*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## GYNECOLOGIC ONCOLOGY

**ESKANDER, RAMEZ**
*Provider ID: 282166*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4002 VISTA WAY
OCEANSIDE, CA 92056
*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) Spoken: Farsi, French, Persian*
*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: 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, Persian*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, TRI CITY MEDICAL CTR, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER*

# D. Direktoryo ng Provider na Espesyalista

*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*

**MATERNAL AND FETAL MEDICINE**

**MELBER, DORA**
*Provider ID: 296991*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1124413026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hungarian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 294651*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**
*Provider ID: 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 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: 255793*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEPHROLOGY**

**LIU, ANDREW**
*Provider ID: 308522*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3300 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 967-9900*
*Fax: (760) 967-6769*
*After Hours Phone: (760) 967-9900*
*Provider Gender: Male*
*NPI: 1710481866*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, 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*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**NEUROLOGY**

**JINDAL, ANUJA**
*Provider ID: 206266*
*Board Certified 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*

**NEUROLOGY**

**PASSIAK, BRITTANY**
*Provider ID: 311210*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1467949693*

# D. Direktoryo ng Provider na Espesyalista

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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*

## OBSTETRICS / GYNECOLOGY

**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*

## OPHTHALMOLOGY

**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*
*Provider Gender: Female*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*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*
*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, UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 205887*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**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: (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**

**KIM, MICHAEL**
*Provider ID: 290904*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1164546313*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-5PM M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KIM, MICHAEL**
*Provider ID: 290902*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1164546313*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: SU 8AM-5PM M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**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*

**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*

**OPTOMETRIST**

**RING, ROBERT**
*Provider ID: 269380*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
*Phone: (760) 726-9383*
*Fax: (760) 726-9897*
*After Hours Phone: (760) 726-9383*
*Provider Gender: Male*
*NPI: 1336228840*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 10AM-7PM TU-TH 9AM-5PM F 9AM-12PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**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):*

# D. Direktoryo ng Provider na Espesyalista

*N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**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*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**

*Provider ID: 206086*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Female*

*NPI: 1760707657*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**FRANK, ETHAN**

*Provider ID: 310281*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1020*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1020*

*Provider Gender: Male*

*NPI: 1720584345*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\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*

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**AGHILI, ROXANA**
*Provider ID: 303781*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1851927883*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

# D. Direktoryo ng Provider na Espesyalista

**MEDICINE**

**CHOO, SUN**

*Provider ID: 296537*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1000*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1000*

*Provider Gender: Female*

*NPI: 1700047628*

*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**

**CRAWFORD, MICHAEL**

*Provider ID: 311160*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

*Phone: (760) 547-1000*

*Fax: (760) 547-1021*

*After Hours Phone: (760) 547-1000*

*Provider Gender: Male*

*NPI: 1336727791*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: CHILDRENS HOSPITAL OF 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: 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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**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 M-F 4PM-10PM SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
*Provider ID: 205787*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172 OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS 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**

**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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*547-1000*
*Provider Gender: Male*
*NPI: 1215564265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**TODD, SARAH**
*Provider ID: 302801*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1407299787*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
*Provider ID: 205813*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1000*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1000*
*Provider Gender: Female*
*NPI: 1083840920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**VARGAS, JACLYN**
*Provider ID: 296485*
*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: 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 ENDOCRINOLOGY

**RANADIVE, SAYALI**
*Provider ID: 311397*
*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: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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 NEPHROLOGY

**RASCHKE, ROBIN**
*Provider ID: 310303*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-8052*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8052*
*Provider Gender: Female*
*NPI: 1609365402*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## PEDIATRIC PULMONOLOGY

# D. Direktoryo ng Provider na Espesyalista

**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 MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICAL MEDICINE / REHABILITATION**

**RYAN, KYLE**
*Provider ID: 275661*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1447645742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**RAMOS, ELENA**
*Provider ID: 301307*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1306489570*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302455*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1205381845*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**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*
*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*

**PSYCHOLOGIST**

**JENSEN, BRIAN**
*Provider ID: 290775*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1518138049*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**KRAPES, MICHAEL**
*Provider ID: 290097*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 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): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY NEUROLOGICAL**

# D. Direktoryo ng Provider na Espesyalista

**BEN-HAIM, SHARONA**
*Provider ID: 311087*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4002 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1942469663*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**HATEFI, DUSTIN**
*Provider ID: 311103*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4002 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**MURTHY, NIKHIL**
*Provider ID: 311154*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4002 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1710371273*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**PHAM, MARTIN**
*Provider ID: 311150*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4002 VISTA WAY
OCEANSIDE, CA 92056
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*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*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CIDAMBI, EMILY**
*Provider ID: 246469*

*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (858) 966-6789*
*Fax: (858) 966-8519*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Female*
*NPI: 1659634699*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**FAIRBANKS, TIMOTHY**
*Provider ID: 205498*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1407010556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health 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*

**SURGERY PEDIATRIC**

**KLING, KAREN**
*Provider ID: 206129*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THOMPSON, KYLE**
*Provider ID: 310988*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
*Phone: (760) 547-1020*
*Fax: (760) 547-1021*
*After Hours Phone: (760) 547-1020*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## 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) 736-6744*
*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

# D. Direktoryo ng Provider na Espesyalista

## 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-TH 8AM-5PM F 8:30AM-12:30PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## ANESTHESIOLOGY PAIN MANAGEMENT

**BROWNLOW, ROY**

*Provider ID: 308402*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

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-TH 8AM-5PM F 8:30AM-12:30PM*

*Website: N/A*

*IPA: Community Care IPA LLC, 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 B1
POWAY, CA 92064

*Phone: (858) 457-8333*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

*After Hours Phone: (858) 457-8333*
*Provider Gender: Female*
*NPI: 1063813475*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 308217*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15725 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (619) 267-8303*
*Fax: (619) 267-4835*
*After Hours Phone: (619) 267-8303*
*Provider Gender: Female*
*NPI: 1205130036*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**DERMATOLOGY**

**POUSTI, BOBAK**

*Provider ID: 311624*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

15725 POMERADO RD STE 102
POWAY, CA 92064

*Phone: (619) 267-8303*

*Fax: (619) 267-4835*

*After Hours Phone: (619) 267-8303*

*Provider Gender: Male*

*NPI: 1932736451*

*Provider English Spoken: Y*

*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-4:30PM*

*Website: N/A*

*IPA: 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*

*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*

**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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

## INTERNAL MEDICINE

**CHEN, ANDREW**
*Provider ID: 269315*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3100*
*Fax: (858) 613-2937*
*After Hours Phone: (858) 675-3100*
*Provider Gender: Male*
*NPI: 1134357007*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

## INTERNAL MEDICINE

**THAPER, MOHINDERPAL**
*Provider ID: 270016*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 575
POWAY, CA 92064
*Phone: (760) 489-1458*
*Fax: (760) 489-1246*
*After Hours Phone: (760) 489-1458*
*Provider Gender: Male*
*NPI: 1295795037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open 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*

## 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*
*Provider Gender: Female*
*NPI: 1457328825*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PODIATRIST**

**BRAZIER, SETH**
*Provider ID: 306398*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*
*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Male*
*NPI: 1033554324*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Provider Language(s) Spoken: Japanese, Korean*
*Cultural Competency: N*
*Hospital Affiliation: SADDLEBACK MEMORIAL MED CTR, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PODIATRIST**

**HAN, KYOUNG**
*Provider ID: 311056*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*
*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Female*
*NPI: 1083954671*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese, Korean*
*Cultural Competency: N*
*Hospital Affiliation: SADDLEBACK MEMORIAL MED CTR, PALOMAR HEALTH, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PODIATRIST**

**READ, TRENTON**
*Provider ID: 296656*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
15706 POMERADO RD STE 102
POWAY, CA 92064
*Phone: (858) 485-1494*
*Fax: (858) 485-1515*
*After Hours Phone: (858) 485-1494*
*Provider Gender: Male*
*NPI: 1952963431*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**RHEUMATOLOGY**

**RAO, SOUMYA**
*Provider ID: 46060*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 400
POWAY, CA 92064
*Phone: (858) 675-3150*
*Fax: (858) 924-1775*
*After Hours Phone: (858) 675-3150*
*Provider Gender: Female*
*NPI: 1033388616*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Kannada, Russian, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**RHEUMATOLOGY**

**REDDY, SMITHA**
*Provider ID: 269402*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15725 POMERADO RD STE 117
POWAY, CA 92064
*Phone: (858) 312-1717*
*Fax: (858) 435-0207*
*After Hours Phone: (858)*

*312-1717*
*Provider Gender: Female*
*NPI: 1750534715*
- *Provider English Spoken: Y*
- *Provider Language(s) Spoken: Hindi, Kannada, Telugu*

*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL CHULA VISTA, 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 HEALTH PLAN DIRECT, Community Care IPA LLC*

## SURGERY ORTHOPEDIC

**BRIED, JAMES**
*Provider ID: 269500*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
15611 POMERADO RD STE 525
POWAY, CA 92064
*Phone: (858) 485-0050*
*Fax: (858) 485-5071*
*After Hours Phone: (858) 485-0050*
*Provider Gender: Male*
*NPI: 1891809257*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
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 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*
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 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*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SAN DIEGO

### ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

**HONG, KIMBERLY**
*Provider ID: 246311*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (858) 657-8530*
*After Hours Phone: (858) 657-8530*
*Provider Gender: Female*
*NPI: 1346515442*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

### ALLERGY IMMUNOLOGY

**BALUCH, NARGES**
*Provider ID: 310787*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL

2
SAN DIEGO, CA 92123
*Phone: (858) 966-5961*
*Fax: (858) 966-6791*
*After Hours Phone: (858) 966-5961*
*Provider Gender: Female*
*NPI: 1720822133*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

## ALLERGY IMMUNOLOGY

**JAMES, CHRISTINE**
*Provider ID: 284917*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144589979*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## ALLERGY IMMUNOLOGY

**RIEDL, MARC**
*Provider ID: 255768*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 230
SAN DIEGO, CA 92122
*Phone: (858) 657-5350*
*After Hours Phone: (858) 657-5350*
*Provider Gender: Male*
*NPI: 1285654889*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## 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*
*Medi-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**

**CABANISS, SCOTT**
*Provider ID: 311436*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821626714*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CABANISS, SCOTT**
*Provider ID: 311435*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821626714*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CANO, SARAH**
*Provider ID: 200959*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750517306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CHAN, CHI-BEW**
*Provider ID: 310044*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205966264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**CHAN, CHI-BEW**
*Provider ID: 310043*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1205966264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**COBLENTZ, IAN**

*Provider ID: 311461*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649730367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**COBLENTZ, IAN**
*Provider ID: 311460*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1649730367*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**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*
*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**

**GOH, REGINE**
*Provider ID: 311500*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205381316*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**GOH, REGINE**
*Provider ID: 311501*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205381316*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**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**
*Provider ID: 201308*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-5754*
*After Hours Phone: (619) 543-5754*
*Provider Gender: Female*
*NPI: 1417361981*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MOELLENHOFF, MICHAEL**
*Provider ID: 311123*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679584791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**MOELLENHOFF, MICHAEL**
*Provider ID: 311124*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1679584791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOMINICAN SANTA CRUZ HOSP*
*Medi-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**

# D. Direktoryo ng Provider na Espesyalista

**NGUYEN, QUOC SY**
*Provider ID: 242188*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871911644*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**OSWALD, JESSICA**
*Provider ID: 239600*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427315118*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SHAW, SUSANNA**
*Provider ID: 255316*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1063685477*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SORIA, CLAIRE**
*Provider ID: 243294*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1447516414*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SREJIC, UNA**

*Provider ID: 206383*

*Board Certified Specialty: Yes*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1588723860*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: Stanford Health Care, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSF MEDICAL CENTER, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**SUYDAM, STEVEN**

*Provider ID: 286569*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1386856821*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TRIVEDI, SURAJ**

*Provider ID: 246749*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1699057885*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TSUDA, PAIGE**

*Provider ID: 271682*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

# D. Direktoryo ng Provider na Espesyalista

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003261595*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TU, MONIQUE**
*Provider ID: 310428*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1497080436*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TULLY, JEFFREY**
*Provider ID: 283689*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871912493*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ANESTHESIOLOGY**

**TZENG, ERIC**
*Provider ID: 284577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801258264*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

## ANESTHESIOLOGY

**YOUNAN, LAWRENCE**

*Provider ID: 240870*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1922432475*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

## ANESTHESIOLOGY 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*

## ANESTHESIOLOGY PAIN MANAGEMENT

**CASTELLANOS, JOEL**

*Provider ID: 243553*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1700296514*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

## ANESTHESIOLOGY PAIN MANAGEMENT

**DAIRO, BRANDON**

*Provider ID: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Medi-Cal Open 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: 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*

## 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*

## 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**CASTELLANOS, LUIS**
*Provider ID: 211765*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1013059286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**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
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**

**RAMSIS, MATTHEUS**
*Provider ID: 310450*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609225135*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CARDIOVASCULAR DISEASE**

**SHEN, JIA**
*Provider ID: 311526*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295053403*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA*

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

## CARDIOVASCULAR DISEASE

**SHEREV, DIMITRI**
*Provider ID: 301306*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
*Phone: (619) 582-4490*
*Fax: (519) 582-4737*
*After Hours Phone: (619) 582-4490*
*Provider Gender: Male*
*NPI: 1154323996*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Bulgarian, Russian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## 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

**APPENZELLER, ERICA**
*Provider ID: 310772*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1780828384*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**
*Provider ID: 277966*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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*
*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 ACUPUNCTURIST**

**ARELLANO, JACQUELINE**
*Provider ID: 277967*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1104129485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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*
*NPI: 1104129485*
*Provider English Spoken: Y*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED ACUPUNCTURIST**

**ARELLANO, JACQUELINE**

*Provider ID: 304137*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4910 DIRECTORS PL
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104129485*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Medi-Cal 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**

**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**

**DISTEFANO, KIMBERLY**

*Provider ID: 311062*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1851914220*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**DISTEFANO, KIMBERLY**

*Provider ID: 311063*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4910 DIRECTORS PL
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1851914220*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal 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: 304131*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4910 DIRECTORS PL
SAN DIEGO, CA 92121

# D. Direktoryo ng Provider na Espesyalista

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 277701*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

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

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 304132*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**JULIAN, FIDES**
*Provider ID: 277700*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407401128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED ACUPUNCTURIST**

**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**

**ABU-DOULEH, NADIA**
*Provider ID: 311556*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1851157937*
*Provider English Spoken: Y*

*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**AGUILA, YESENIA**
*Provider ID: 304624*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 266-6000*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Female*
*NPI: 1245966092*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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*

**CERTIFIED NURSE PRACTITIONER**

**AMOS, MARIA**
*Provider ID: 291439*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235891953*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ARENAS, CECILY**
*Provider ID: 311129*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1700031507*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal 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**

**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*

**CERTIFIED NURSE PRACTITIONER**

**BAKER, TANYA**
*Provider ID: 255625*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (858) 534-8019*
*After Hours Phone: (858) 534-8019*
*Provider Gender: Female*
*NPI: 1699184259*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BENARD, ROBERT**
*Provider ID: 268229*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184027724*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, Highland Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BILOTTA, NATALIE**
*Provider ID: 291418*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 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*

**CERTIFIED NURSE PRACTITIONER**

**BROWN, VICTORIA**
*Provider ID: 307669*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750033890*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BROWN, VICTORIA**
*Provider ID: 311039*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750033890*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BROWN, VICTORIA**
*Provider ID: 307668*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 922-6827*
*After Hours Phone: (800) 922-6827*
*Provider Gender: Female*
*NPI: 1750033890*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**BUENROSTRO, CHRISTINA**
*Provider ID: 243718*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1851749253*
*Provider English Spoken: Y*
*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*

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**BUI, ANH**

*Provider ID: 304272*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 810-8700*

*Provider Gender: Male*

*NPI: 1184309684*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 14\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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**

**CAPOZZI, JENNIFER**

*Provider ID: 241031*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1336258276*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHANTALA, ELIZABETH**

*Provider ID: 291305*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1942430442*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**CHAVEZ, ALEXANDRIA**

*Provider ID: 243357*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1811543622*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHEATHAM, BRITTANY**

*Provider ID: 291461*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1184111684*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHOATE, BERNADETTE**

*Provider ID: 286369*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104173558*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHOATE, BERNADETTE**

*Provider ID: 286368*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CHUNG, SUEMIN**
*Provider ID: 311038*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1598477093*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**COLEMAN, PAGE**
*Provider ID: 304288*
*Board Certified 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, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**COLEMAN, PAGE**
*Provider ID: 311049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871365312*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNER, PAMELA**
*Provider ID: 299930*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W 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*

**CERTIFIED NURSE PRACTITIONER**

# D. Direktoryo ng Provider na Espesyalista

**CONNOR, CAROLINE**
*Provider ID: 279835*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609081710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**CONNOR, CAROLINE**
*Provider ID: 279836*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1609081710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**COSINO, ANJELICA**
*Provider ID: 201309*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295238749*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**DAVIES-UPPAL, ALLISON**
*Provider ID: 311441*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1053002360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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*
*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 JANE**
*Provider ID: 300051*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*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**

**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: 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**

**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*

*Min/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: 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**

# D. Direktoryo ng Provider na Espesyalista

**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**

**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*

**CERTIFIED NURSE PRACTITIONER**

**EDNACOT, KARYNNE**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

*Provider ID: 309725*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
8010 FROST ST STE 100
SAN DIEGO, CA 92123
*Phone: (858) 637-4700*
*Fax: (858) 637-4701*
*After Hours Phone: (858) 637-4700*
*Provider Gender: Female*
*NPI: 1548027964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**EDNACOT, KARYNNE**
*Provider ID: 309540*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8010 FROST ST STE 100
SAN DIEGO, CA 92123
*Phone: (858) 637-4700*
*Fax: (858) 637-4701*
*After Hours Phone: (858) 637-4700*
*Provider Gender: Female*
*NPI: 1548027964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ERICKSON, LISA**
*Provider ID: 287444*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669442182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ERICKSON, LISA**
*Provider ID: 278982*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669442182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**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**

**FERMIL MITCHELL, YVONNE**

*Provider ID: 311352*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

*Phone: (619) 266-3332*

*Fax: (619) 564-8236*

*After Hours Phone: (619) 266-3332*

*Provider Gender: Female*

*NPI: 1518086388*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**FISHER, SLOANE**

*Provider ID: 301585*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1538807003*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**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*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA 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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*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**GIORGI, ASHLEY**
*Provider ID: 311073*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 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*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, 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, 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*
*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: 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*

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*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**

**GRAYSON, ANDREA**

*Provider ID: 310325*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

*Phone: (844) 200-2426*

*Fax: (858) 578-4417*

*After Hours Phone: (844) 200-2426*

*Provider Gender: Female*

*NPI: 1447577671*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-6PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**

*Provider ID: 293260*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*

*Provider Gender: Female*

*NPI: 1346443983*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HA, THU**

*Provider ID: 293261*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 810-8700*

*Provider Gender: Female*

*NPI: 1346443983*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE**

# D. Direktoryo ng Provider na Espesyalista

**PRACTITIONER**

**HARKNESS, RUMIKO**
*Provider ID: 208841*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487785093*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**HART, BECKY**
*Provider ID: 305337*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Provider Gender: Female*
*NPI: 1316626344*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**
*Provider ID: 268656*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-7484*
*Fax: (858) 966-4064*
*After Hours Phone: (858) 966-7484*
*Provider Gender: Female*
*NPI: 1699078923*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**HEFNER, ANNA**
*Provider ID: 308420*
*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: 1588913537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*

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*IPA: Community Care IPA LLC*

**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*

*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*

*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*Provider ID: 295393*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W 8:30AM-5:30PM*
*TH 8:30AM-8:30PM*

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**
*Provider ID: 295392*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1114957289*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W 8:30AM-5:30PM*
*TH 8:30AM-8:30PM*

**CERTIFIED NURSE PRACTITIONER**

**JONES, CHRISTA**
*Provider ID: 275563*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396371431*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

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**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: 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**

**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**

**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*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**LAFORTEZA, JOZELLE**
*Provider ID: 202666*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538578307*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301601*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3444 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
*Phone: (858) 430-1101*
*Fax: (858) 429-7929*
*After Hours Phone: (858) 430-1101*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**
*Provider ID: 301603*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Female*
*NPI: 1457670119*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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: 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**

**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*
*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**

**MANZO, CORINA**
*Provider ID: 304481*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1669087326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MARTINEZ, CAROLYN**

*Provider ID: 293345*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (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) 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**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**MICK, SHARON**
*Provider ID: 299649*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**MICK, SHARON**
*Provider ID: 299648*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1891061966*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*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: 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*

**CERTIFIED NURSE PRACTITIONER**

**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): N*
*Accessibility: CONTACT PROVIDER*
*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
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*

**CERTIFIED NURSE PRACTITIONER**

**NOVENO, HILARIO JR**
*Provider ID: 286912*
*Board Certified Specialty: No*

# D. Direktoryo ng Provider na Espesyalista

*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: Arabic, Spanish, 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**

**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*
*NPI: 1124486865*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish, 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*

**CERTIFIED NURSE PRACTITIONER**

**OREJEL, EDITH**
*Provider ID: 296716*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1073278180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**OREJEL, EDITH**
*Provider ID: 296715*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1073278180*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W 8:30AM-5:30PM*
*TH 5:30PM-8:30PM*
*F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PACE, RACHELLE**
*Provider ID: 309961*
*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: 1588334973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal 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**

**PACE, RACHELLE**
*Provider ID: 311031*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1588334973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PAI, SARAH**
*Provider ID: 276870*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255762167*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PAPPALARDO, ASHLEY**
*Provider ID: 311107*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386302099*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**
*Provider ID: 293249*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**PATIAG, DANIEL**
*Provider ID: 293248*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1073169769*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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*

**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*
*Provider Language(s) Spoken: Persian*
*Cultural Competency: N*
*Medi-Cal 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*

**CERTIFIED NURSE PRACTITIONER**

**RIEGO, SUZANNE**
*Provider ID: 214477*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (858) 292-7200*
*After Hours Phone: (858) 292-7200*
*Provider Gender: Female*
*NPI: 1144453754*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**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*

# D. Direktoryo ng Provider na Espesyalista

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**

*Provider ID: 302559*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4290 POLK AVE
SAN DIEGO, CA 92105

*Phone: (619) 563-0250*

*Fax: (858) 633-4681*

*After Hours Phone: (619) 563-0250*

*Provider Gender: Female*

*NPI: 1548683378*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**

*Provider ID: 311051*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

6645 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1548683378*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSS, CRYSTAL**

*Provider ID: 287763*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

350 DICKINSON ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1548683378*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**ROSSI, CATHERINE**

*Provider ID: 291445*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

# D. Direktoryo ng Provider na Espesyalista

200 W 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*

**CERTIFIED NURSE PRACTITIONER**

**ROZO, JOSE**
*Provider ID: 300037*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1528787132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
*Provider ID: 293288*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1285732586*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**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**

**SANTANGELO, JOANNE**
*Provider ID: 293285*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
*Provider ID: 293286*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1619370475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*Provider ID: 293259*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*

*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
*Provider ID: 293258*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1225012842*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**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*

**CERTIFIED NURSE PRACTITIONER**

**SELBY, BLAKE**
*Provider ID: 246423*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417194358*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SELBY, BLAKE**
*Provider ID: 256646*
*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417194358*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**SIETSMA, ALEXANDRA**
*Provider ID: 311055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932522778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**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*

**CERTIFIED NURSE PRACTITIONER**

**TAING, JENNIFER**
*Provider ID: 201573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1649528357*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/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**

# D. Direktoryo ng Provider na Espesyalista

**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**

**THOMPSON, COURTNEY**
*Provider ID: 311544*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3 RM 1
SAN DIEGO, CA 92103
*Phone: (619) 543-3995*
*Fax: (619) 543-3964*
*After Hours Phone: (619) 543-3995*
*Provider Gender: Female*
*NPI: 1629487285*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**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 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*

**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*

**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**

**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*

**CERTIFIED NURSE PRACTITIONER**

**WALDRUP, LARHONDA**
*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*
*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**

**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, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WHITEHURST, UNIQUE**
*Provider ID: 311075*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 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*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WIETZKE, MATTHEW**
*Provider ID: 311060*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518613678*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal 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**

**WONG, MAYBELLE**
*Provider ID: 311074*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1437921459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WOO, ANDY**
*Provider ID: 311024*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1609450550*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**WOO, ANDY**
*Provider ID: 299916*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W 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*
*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*

**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*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**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**

**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**

**BOEING, KRISTINA**
*Provider ID: 274397*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205134301*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**BURROWS, TERENCE**
*Provider ID: 256694*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1023194560*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**FARRIS, AMANDA**

*Provider ID: 311600*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538900154*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FARRIS, AMANDA**

*Provider ID: 311601*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538900154*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**FERRITER, STACY**

*Provider ID: 265295*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780725556*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**GARCIA, CALVIN**
*Provider ID: 217365*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*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*

**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): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**LANTRIP, KEATON**
*Provider ID: 311518*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043059686*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**LANTRIP, KEATON**
*Provider ID: 311517*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043059686*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**RAMIREZ, NICOLE**

*Provider ID: 291404*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1487213500*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**SACKS, BRENT**
*Provider ID: 278003*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1982133591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**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*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073241618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal 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*

# D. Direktoryo ng Provider na Espesyalista

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073241618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**EKHOLM, JANNA**
*Provider ID: 290584*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1588977151*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GOODWIN, RACHEL**
*Provider ID: 210019*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1518274919*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GOODWIN, RACHEL**
*Provider ID: 210018*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1518274919*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Website: N/A*
*IPA: UCSD Medical Group*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GREAR MANN, MELISSA**
*Provider ID: 210053*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255384475*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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*
*Provider English Spoken: Y*
*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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD*

**CHIROPRACTOR**

**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 8AM-5PM SA 9AM-4PM*
*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 8AM-5PM SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD*

**CHIROPRACTOR**

**CHAMPAGNE, ALLISON**
*Provider ID: 310817*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Female*
*NPI: 1861957482*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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*
*Provider English Spoken: Y*
*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**

**MONTANE, RUBEN**
*Provider ID: 309694*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*Fax: (619) 628-5550*
*After Hours Phone: (619) 429-3733*
*Provider Gender: Male*
*NPI: 1346725769*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**DERMATOLOGY**

**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) 750-2984*

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*After Hours Phone: (858) 750-2983*
*Provider Gender: Female*
*NPI: 1285817569*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Romanian*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, YUMA REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**DERMATOLOGY**

**DANG, TIMOTHY**
*Provider ID: 309721*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518427913*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**KANNAN, SWATI**
*Provider ID: 286287*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1508155227*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**KAUNITZ, GENEVIEVE**
*Provider ID: 285011*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1053734905*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**DERMATOLOGY**

**LIN, SHINKO**

*Provider ID: 308736*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

*Phone: (619) 267-8303*

*Fax: (619) 267-4835*

*After Hours Phone: (619) 267-8303*

*Provider Gender: Female*

*NPI: 1205130036*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIN, SHINKO**

*Provider ID: 308915*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

*Phone: (619) 267-8303*

*Fax: (619) 267-4835*

*After Hours Phone: (619) 267-8303*

*Provider Gender: Female*

*NPI: 1205130036*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: GROSSMONT HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**DERMATOLOGY**

**LIOU, 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**

**MALONEY, NOLAN**

*Provider ID: 311459*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1124655618*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**DERMATOLOGY**

**SHI, VERONICA**
*Provider ID: 271713*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (858) 657-8322*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 657-8322*
*Provider Gender: Female*
*NPI: 1366897464*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**SHI, VERONICA**
*Provider ID: 286335*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1366897464*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

**STERN, MARLEIGH**
*Provider ID: 306888*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*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*

**DERMATOLOGY**

**SUTHERLAND, ANNA**
*Provider ID: 311463*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 220
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1881222388*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**DERMATOLOGY**

# D. Direktoryo ng Provider na Espesyalista

**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*
*Medi-Cal Open Panel: Yes*
*Min/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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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): 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**

**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**

**EAGLE, SONJA**
*Provider ID: 311503*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699394114*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**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) 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**

**HOGUE, BRENNA**
*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
*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**

**LIPPI, MATTHEW**
*Provider ID: 311492*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932736485*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**EMERGENCY MEDICINE**

**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): 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): 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*
*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*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*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**

**DECAMPS, SCARLETT**
*Provider ID: 311511*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1477014611*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**EKANAYAKE, PREETHIKA**
*Provider ID: 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*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287780*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287781*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287779*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**ENDOCRINOLOGY METABOLISM DIABETES**

**NAGELBERG, JODI**
*Provider ID: 287782*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720474141*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open 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**

**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*

**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*

**ENDOCRINOLOGY METABOLISM DIABETES**

**VALDEZ, KRYSTAL ANGELI**
*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: (619) 474-4008*
*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*

## ENDOCRINOLOGY METABOLISM DIABETES

**VALDEZ, KRYSTAL ANGELI**
*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: (619) 474-4008*
*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: 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: 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*

# D. Direktoryo ng Provider na Espesyalista

*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: 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**

**BERNADETT, ALEX**
*Provider ID: 296739*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6699 ALVARADO RD STE 2100
SAN DIEGO, CA 92120
*Phone: (619) 229-3909*
*Fax: (619) 229-3902*
*After Hours Phone: (619) 229-3909*
*Provider Gender: Male*
*NPI: 1215382841*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**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*
*Provider Language(s) Spoken: Spanish*
*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: 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*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207167*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**CHEN, ALICE**
*Provider ID: 207163*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265810337*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**DANG, LAUREL**
*Provider ID: 309605*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200

SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396366050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-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**

**HILL, LINDA**
*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*
*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**

**HILL, LINDA**
*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*
*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*

**FAMILY PRACTICE**

**HONG, DANA**
*Provider ID: 311455*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1982276341*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOHN, TANNER**
*Provider ID: 303515*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 595-0258*
*After Hours Phone: (619)*

*662-4100*
*Provider Gender: Male*
*NPI: 1043707326*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300057*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
*Phone: (858) 249-6890*
*After Hours Phone: (858) 249-6890*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 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*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**JOLICOEUR, MEGAN**
*Provider ID: 300059*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1114366192*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**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**

**MARTINEZ, BRIANNA**
*Provider ID: 311506*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770161150*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**MCLAUGHLIN, ERIK**
*Provider ID: 303847*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0505*
*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: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Ukrainian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**PERESS, LILIA**
*Provider ID: 304277*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1275945446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Ukrainian*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**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 SA 8:30AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**RYAN, RHIANNON**
*Provider ID: 311477*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184205668*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**FAMILY PRACTICE**

**SCOTT, LAGINA**
*Provider ID: 302648*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 263-9601*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1558897009*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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) 628-5550*
*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*

# D. Direktoryo ng Provider na Espesyalista

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**VO, PHU LUONG**
*Provider ID: 303332*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1043849177*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

**LUKACZ, EMILY**
*Provider ID: 256955*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750339446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

**LUKACZ, EMILY**
*Provider ID: 256956*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 360
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1750339446*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**ANAND, GOBIND**
*Provider ID: 304187*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861626814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**ANAND, GOBIND**
*Provider ID: 272837*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2347*
*Fax: (858) 657-7259*
*After Hours Phone: (619) 543-2347*
*Provider Gender: Male*
*NPI: 1861626814*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**BAUMAN, LAURA**
*Provider ID: 260041*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1255697850*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**GASTROENTEROLOGY**

**CARETHERS, JOHN**
*Provider ID: 311109*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518048990*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**CHAVEZ, LUIS**
*Provider ID: 311340*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
*Phone: (619) 266-3332*
*Fax: (619) 564-8236*
*After Hours Phone: (619) 266-3332*
*Provider Gender: Male*
*NPI: 1295224905*
*Provider English Spoken: Y*
*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*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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*

**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*

**GASTROENTEROLOGY**

**HASAN, AWS**
*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*

**GASTROENTEROLOGY**

**HILDRETH, AMBER**
*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) 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, UCSD Medical Group*

**GASTROENTEROLOGY**

**KUMAR, SOMA**

*Provider ID: 205377*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123

*Phone: (858) 966-4003*

*Fax: (858) 560-6798*

*After Hours Phone: (858) 966-4003*

*Provider Gender: Female*

*NPI: 1356502520*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**GASTROENTEROLOGY**

**NOVO, MEGAN**

*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) 266-6000*

*After Hours Phone: (619) 266-3332*

*Provider Gender: Female*

*NPI: 1770961971*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**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**

**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**

**SHAH, SHAILJA**
*Provider ID: 304178*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1073803243*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**TSAI, MATTHEW**
*Provider ID: 304196*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285051177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**GASTROENTEROLOGY**

**YOUSSEF, FADY**
*Provider ID: 304186*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1265887723*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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

**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
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

**GENETICS CLINICAL**

**REIMERS, REBECCA**
Provider ID: 302348
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5840
Fax: (858) 966-8550
After Hours Phone: (858) 966-5840
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
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

**GENETICS MEDICAL**

**DELCAMPOCASANELLES, MIGUEL**
Provider ID: 206013
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5840
Fax: (858) 966-4064
After Hours Phone: (858) 966-5840
Provider Gender: Male
NPI: 1598141475
Provider English Spoken: Y
Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

# D. Direktoryo ng Provider na Espesyalista

**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*

*IPA: Rady Childrens Health Network*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**

*Provider ID: 268689*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

*Phone: (619) 583-7002*

*Fax: (619) 583-9404*

*After Hours Phone: (619) 583-7002*

*Provider Gender: Female*

*NPI: 1063558856*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**

*Provider ID: 268691*

*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**

**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*

**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*

**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*

**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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HEPATOLOGY**

**BARMAN, PRANAB**
*Provider ID: 241953*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
*Phone: (800) 826-5273*
*After Hours Phone: (800) 826-5273*
*Provider Gender: Male*
*NPI: 1023301991*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**
*Provider ID: 276671*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**
*Provider ID: 245573*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR

SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**CHILDERS, DIANA**
*Provider ID: 275068*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1033128376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**HOSPITALIST MD/DO**

**DUBE, AMANDA**
*Provider ID: 310293*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1710407531*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**HOSPITALIST MD/DO**

**FIRESTEIN, CATHERINE**
*Provider ID: 275387*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427348382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**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**

**KUPELIAN, CHLOE**
*Provider ID: 310785*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1780013748*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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): N*
*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*

**INFECTIOUS DISEASE**

**HORTON, LUCY**
*Provider ID: 240887*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427324821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**MARTIN, THOMAS**
*Provider ID: 277226*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093193583*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**MARTIN, THOMAS**
*Provider ID: 277225*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (619) 543-5890*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-5890*
*Provider Gender: Male*
*NPI: 1093193583*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INFECTIOUS DISEASE**

**MOODLEY, AMARAN**
*Provider ID: 208558*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (885) 966-7785*
*Fax: (858) 966-8658*
*After Hours Phone: (885) 966-7785*
*Provider Gender: Male*
*NPI: 1104023670*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**INFECTIOUS DISEASE**

**PANNARAJ, PIA**
*Provider ID: 301026*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7785*
*Fax: (858) 966-8658*
*After Hours Phone: (858) 966-7785*
*Provider Gender: Female*
*NPI: 1942478524*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**INFECTIOUS DISEASE**

**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*

**INFECTIOUS DISEASE**

**RAMIREZ SANCHEZ, CLAUDIA**
*Provider ID: 299946*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1659720555*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*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**

**TOVARPADUA, 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*
*Provider Language(s) Spoken: Spanish*
*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**

**TOVARPADUA, 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*
*Provider Language(s) Spoken: Spanish*
*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**

**WILKIN, TIMOTHY**
*Provider ID: 311164*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1740334978*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**ARUTYUNOV, BORIS**
*Provider ID: 201910*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-9186*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Male*
*NPI: 1144562703*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BALL, SHELDON**
*Provider ID: 294136*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1689646275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**BALL, SHELDON**
*Provider ID: 294137*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1689646275*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 8:30AM-8:30PM*

*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**BARRIOLA RUBARTH, RODRIGO**
*Provider ID: 311570*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1336729979*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**BORDIN-WOSK, TALYA**
*Provider ID: 273983*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (760) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (760) 471-9186*
*Provider Gender: Female*
*NPI: 1801184973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**CHENG, GEORGE**
*Provider ID: 247639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1316174568*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**DJEKIC, KRISTINA**
*Provider ID: 286668*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1417343732*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**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*

**INTERNAL MEDICINE**

**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*

**INTERNAL MEDICINE**

**HASTIE, ELIZABETH**
*Provider ID: 291431*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1154818797*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**HOGARTH, MICHAEL**
*Provider ID: 214386*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225019193*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA*

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*JOLLA JOHN SALLY THORNTON, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**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*

**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 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*
*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*

# D. Direktoryo ng Provider na Espesyalista

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**

**NGUYEN, MICHELLE**
*Provider ID: 311483*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407367618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NGUYEN, MICHELLE**
*Provider ID: 311484*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider Gender: Female*
*NPI: 1407367618*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**NOKES, BRANDON**
*Provider ID: 287582*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1487040051*
*Provider English 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**

**SHAMSINEJAD BABAKI, ARASH**
*Provider ID: 309544*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1750498119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO*
*Medi-Cal Open 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*

**INTERNAL MEDICINE**

**SIRIPHAND, CHRISTOPHER**
*Provider ID: 311445*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1891258596*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**SMITH, CHELSEY**
*Provider ID: 239920*
*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: 275926*
*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: 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: 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**

**TAYLOR, DAVID**
*Provider ID: 274469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*
*NPI: 1033572995*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**THOMAS, ROBERT**
*Provider ID: 238929*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053765909*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**WANG, ANGELA**
*Provider ID: 259534*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (855) 355-5864*
*Fax: (888) 539-8781*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Female*
*NPI: 1730133976*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**

**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*

**INTERNAL MEDICINE**

**WASTILA, LISA**
*Provider ID: 310175*
*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: 1043375231*
*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 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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*
*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**

**AFSHAR, KAMYAR**
*Provider ID: 311561*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Male*
*NPI: 1407050669*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**AKUTHOTA, PRAVEEN**
*Provider ID: 311490*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 471-9186*
*Fax: (619) 543-8255*
*After Hours Phone: (619) 471-9186*
*Provider Gender: Male*
*NPI: 1396704698*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**AKUTHOTA, PRAVEEN**
*Provider ID: 311491*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR STE 2
SAN DIEGO, CA 92121
*Phone: (855) 355-5864*
*Fax: (858) 657-6171*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1396704698*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

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

**INTERNAL MEDICINE**
**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**
*Provider ID: 210825*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BEGOVIC, ADNAN**
*Provider ID: 276291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR STE 3-313
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1093791014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**BOROK, ZEA**
*Provider ID: 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*
*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*

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# D. Direktoryo ng Provider na Espesyalista

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**DEWOLF, SEAN**
*Provider ID: 311453*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1518312230*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**HEPOKOSKI, MARK**
*Provider ID: 311546*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1649408790*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**IBRAHIM, ISLAM**
*Provider ID: 311489*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1962586917*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, LONG BEACH MEMORIAL MED CTR, TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**JOHN, MIRA**
*Provider ID: 311591*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013448588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**JOHN, MIRA**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider ID: 311590*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1013448588*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**KAMDAR, BIREN**
*Provider ID: 311452*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (855) 355-5864*
*After Hours Phone: (855) 355-5864*
*Provider Gender: Male*
*NPI: 1528115417*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SANTA MONICA UCLA MED CTR, RONALD REAGAN UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311559*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**LIN, CHRISTINE**
*Provider ID: 311557*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR

SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699979591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ODISH, MAZEN**
*Provider ID: 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 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**

# D. Direktoryo ng Provider na Espesyalista

**CRITICAL CARE MEDICINE**

**ORR, JEREMY**

*Provider ID: 311524*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1992940969*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SANTA MONICA UCLA 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*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**ORR, JEREMY**

*Provider ID: 311525*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1992940969*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SANTA MONICA UCLA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**INTERNAL MEDICINE**
**CRITICAL CARE MEDICINE**

**TRAN, LINH**

*Provider ID: 271939*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1851682728*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/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*

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*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**BUI, QUAN**
*Provider ID: 310076*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1831553718*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**CRUZ RODRIGUEZ, JOSE**
*Provider ID: 300061*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1457770240*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**MA, JANET**
*Provider ID: 311577*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
2131 3RD AVE
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1922454396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**INTERVENTIONAL CARDIOLOGY**

**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**

**MOHAMEDALI, BURHAN**

*Provider ID: 309250*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

412 WASHINGTON ST
SAN DIEGO, CA 92103

*Phone: (619) 616-2100*

*Fax: (619) 616-2104*

*After Hours Phone: (619) 616-2100*

*Provider Gender: Male*

*NPI: 1831393289*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish, Swahili*

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC*

**INTERVENTIONAL CARDIOLOGY**

**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, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER, SHARP CORONADO HOSP AND HEALTHCARE CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 9AM-5PM*

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**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*

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**
*Provider ID: 309096*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
412 WASHINGTON ST
SAN DIEGO, CA 92103
*Phone: (619) 616-2100*
*Fax: (619) 616-2104*
*After Hours Phone: (619) 616-2100*
*Provider Gender: 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: 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: 15\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*

**LICENSED PROFESSIONAL CLINICAL COUNSELOR**

**GARCIA, JENNI**
*Provider ID: 299310*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3025 BEYER BLVD
SAN DIEGO, CA 92154
*Phone: (619) 662-4100*
*Fax: (619) 662-4119*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1437775863*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**LICENSED PROFESSIONAL CLINICAL COUNSELOR**

**NAKAMURA, TIFFANY**
*Provider ID: 239584*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
*Phone: (858) 534-8019*
*After Hours Phone: (858) 534-8019*
*Provider Gender: Female*
*NPI: 1356846349*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/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**

**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**

**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*

**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): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**EMERUWA, UKACHI**
*Provider ID: 300012*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1245627421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**EMERUWA, UKACHI**
*Provider ID: 300011*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1245627421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**MATERNAL AND FETAL MEDICINE**

**LAURENT, LOUISE**
*Provider ID: 208640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770532707*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/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**

**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*
*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*

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# D. Direktoryo ng Provider na Espesyalista

**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*

*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: 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*

*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*

**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*

*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**

**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*
*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: 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, 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**

**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*
*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*
*RADY CHILDRENS HEALTH NETWORK*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 939-4102*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1801207634*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*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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# D. Direktoryo ng Provider na Espesyalista

**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*

**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*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**

*Provider ID: 277307*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

*Phone: (858) 966-6710*

*Fax: (858) 939-4102*

*After Hours Phone: (858) 966-6710*

*Provider Gender: Male*

*NPI: 1477563302*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

*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: 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*

**MATERNAL AND FETAL MEDICINE**

**WESTERMANN, MELISSA**
*Provider ID: 277353*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-6710*
*Fax: (858) 966-6711*
*After Hours Phone: (858) 966-6710*
*Provider Gender: Female*
*NPI: 1760730758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*

**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**

**DELROSARIO, 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*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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 HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**LANE, BRIAN**
*Provider ID: 205707*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Male*
*NPI: 1427129287*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 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*

**NEONATAL / PERINATAL MEDICINE**

**MATOBA, NANA**
*Provider ID: 310508*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3665 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
*Phone: (858) 966-8801*
*Fax: (858) 966-8528*
*After Hours Phone: (858) 966-8801*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 297974*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Female*
*NPI: 1801952197*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Japanese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*Min/Max 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: 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*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**NYMAN, KATHERINE**
*Provider ID: 301822*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4077 5TH AVE
SAN DIEGO, CA 92103
*Phone: (619) 260-7046*
*Fax: (619) 686-3843*
*After Hours Phone: (619) 260-7046*
*Provider Gender: Female*
*NPI: 1003260951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*
*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*

**NEONATAL / PERINATAL MEDICINE**

**ODONNELL, F**
*Provider ID: 205578*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5818*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5818*
*Provider Gender: Female*
*NPI: 1477625325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN*

*DIEGO, SCRIPPS MERCY 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**

**PHAM, BETTY**
*Provider ID: 310310*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3759*
*Fax: (619) 543-3812*
*After Hours Phone: (619) 543-3759*
*Provider Gender: Female*
*NPI: 1790217750*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SAUER, CHARLES**
*Provider ID: 303904*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 249-5839*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Male*
*NPI: 1538388988*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SPEZIALE, MARK**
*Provider ID: 206126*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5888*
*Fax: (858) 966-7483*
*After Hours Phone: (858) 966-5888*
*Provider Gender: Male*
*NPI: 1801978143*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEONATAL / PERINATAL MEDICINE**

**SWEENEY, NATHALY**
*Provider ID: 206182*
*Board Certified Specialty: No*
*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*

## 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

**BALBOA NEPHROLOGY MED GRP INC,**
*Provider ID: 308472*
*IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD*
8010 FROST ST STE 100
SAN DIEGO, CA 92123
*Phone: (858) 637-4700*
*Fax: (858) 637-4701*
*After Hours Phone: (858) 637-4700*
*NPI: 1316997505*
*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-5PM*
*Website: www.balboacare.com*

## 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**

**RIFKIN, DENA**
*Provider ID: 311457*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6248*
*After Hours Phone: (619) 543-6248*
*Provider Gender: Female*
*NPI: 1578519203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**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**

**SINGH, PRABHLEEN**
*Provider ID: 311033*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235207234*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Punjabi*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEPHROLOGY**

**ZHONG, YAN**
*Provider ID: 296053*
*Board Certified 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*

## 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*

## NEUROLOGY

**BEVINS, ELIZABETH**
*Provider ID: 241943*
*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: 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*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**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**

**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**

**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
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**

**GHOLIPOUR, TAHA**
*Provider ID: 311496*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801159611*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**GHOLIPOUR, TAHA**
*Provider ID: 311495*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1801159611*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Persian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**GOLD, JEFFREY**
*Provider ID: 283335*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 576-8412*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1568773984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GOLD, JEFFREY**
*Provider ID: 303287*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*

*Provider Gender: Male*
*NPI: 1568773984*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GUIDO-ESTRADA, NATALIE**
*Provider ID: 303271*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1528353521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**GUNDOGDU, MELEK**
*Provider ID: 201623*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Female*
*NPI: 1437253671*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Turkish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**HANNAWI, ANDREW**
*Provider ID: 283154*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 576-8412*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1194179135*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**HEADLEY, ALISON**
*Provider ID: 311599*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386007383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**HEADLEY, ALISON**
*Provider ID: 311598*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1386007383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**
*Provider ID: 311468*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053326710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**
*Provider ID: 304154*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1053326710*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311184*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311186*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**JACQUES, KAYLA**
*Provider ID: 311185*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1538622014*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KANSAL, LEENA**
*Provider ID: 311521*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Female*
*NPI: 1871759084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KANSAL, LEENA**
*Provider ID: 311523*

*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871759084*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**KHAMISHON, BORIS**
*Provider ID: 269923*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
*Phone: (619) 582-2595*
*Fax: (619) 229-8006*
*After Hours Phone: (619) 582-2595*
*Provider Gender: Male*
*NPI: 1104922038*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**NEUROLOGY**

**KIMMCMANUS, 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*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 304198*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 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*

**NEUROLOGY**

**LEE, DAVID**
*Provider ID: 311572*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**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*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**PASSIAK, BRITTANY**
*Provider ID: 311209*
*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: 1467949693*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**PASSIAK, BRITTANY**
*Provider ID: 311208*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1467949693*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**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
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: UCSF 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*

**NEUROLOGY**

**RIGGINS, NINA**
*Provider ID: 304200*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1568655264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER*
*Medi-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*
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*

**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: 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*

**NEUROLOGY**

**SHIH, JERRY**
*Provider ID: 311473*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790774156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SHIH, JERRY**
*Provider ID: 311472*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD

SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790774156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SHIH, JERRY**
*Provider ID: 311470*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*Fax: (619) 543-6806*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Male*
*NPI: 1790774156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**SWEAT, MARIE**
*Provider ID: 303831*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1861929036*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY**

**TECOMA, EVELYN**
*Provider ID: 311535*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174556518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**TECOMA, EVELYN**
*Provider ID: 311533*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*After Hours Phone: (619) 543-3500*
*Provider Gender: Female*
*NPI: 1174556518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**NEUROLOGY**

**UNG, HOAMENG**
*Provider ID: 311433*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1619438363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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**

**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**

**ZIMBRIC, MICHAEL**
*Provider ID: 206272*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1487819546*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health*

*Network*

**NEUROLOGY**

**ZIMBRIC, MICHAEL**
*Provider ID: 303284*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Male*
*NPI: 1487819546*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**NEUROLOGY CHILD**

**GRAVES, JENNIFER**
*Provider ID: 261037*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1992849863*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSF MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*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: 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*

**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*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311193*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311192*
*Board Certified 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*NPI: 1790149425*
*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**

**ASHAK, DANI**
*Provider ID: 311191*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*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**

**ASHAK, DANI**
*Provider ID: 311190*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**ASHAK, DANI**
*Provider ID: 311189*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790149425*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**
*Provider ID: 290731*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1497738439*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**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, Persian, 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**

**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**

**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: 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**

# D. Direktoryo ng Provider na Espesyalista

**DELCORE, LAURA**
*Provider ID: 291330*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790128759*
*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: 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**

**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*

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
*Provider ID: 291338*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1730507567*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP 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: 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*

**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*

**OBSTETRICS / GYNECOLOGY**

**FERRANDO, CECILE**
*Provider ID: 311105*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255592325*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**FRUGONI, GINA**
*Provider ID: 270056*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (619) 400-5074*
*After Hours Phone: (619) 400-5074*
*Provider Gender: Female*
*NPI: 1578729315*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OBSTETRICS / GYNECOLOGY**

**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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**GROGAN, BRIAN**
*Provider ID: 296001*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Male*
*NPI: 1235218439*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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*
*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*

# D. Direktoryo ng Provider na Espesyalista

*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**

**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*
*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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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**
*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**

**LAMALE-SMITH, LEAH**
*Provider ID: 208681*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396904876*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL*

*CTR*
*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: 303064*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1770702177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**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**

**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: Faroese, Farsi*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD LA JOLLA JOHN SALLY THORNTON, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*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**

**MCKINNEY, SARA**
*Provider ID: 311116*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311115*
*Board Certified 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: 1558708297*
*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**

**MCKINNEY, SARA**
*Provider ID: 311114*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311113*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MCKINNEY, SARA**
*Provider ID: 311112*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1558708297*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**MEADOWS, AUDRA**
*Provider ID: 285741*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W 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: 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**

**MELENDEZ, ARIANA**
*Provider ID: 299922*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1295232973*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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**

# D. Direktoryo ng Provider na Espesyalista

**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: 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: 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*

**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**

**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**

**SUYAMA, JULIE**
*Provider ID: 284291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306372800*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OBSTETRICS / GYNECOLOGY**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*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 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

**KIM, JOHN**
*Provider ID: 255385*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 471-9210*
*After Hours Phone: (619) 471-9210*
*Provider Gender: Male*
*NPI: 1114102639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## OCCUPATIONAL THERAPIST

**BOND, KIMBERLEE**
*Provider ID: 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**

**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**

**JEFFERIES, KATHLEEN**
*Provider ID: 311346*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144410648*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OCCUPATIONAL THERAPIST**

**LARSEN, JULIE**
*Provider ID: 258359*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
*Phone: (855) 543-0333*
*Fax: (858) 657-1809*
*After Hours Phone: (855) 543-0333*
*Provider Gender: Female*
*NPI: 1497009179*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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*
*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*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OPHTHALMOLOGY**

**BAXTER, SALLY**
*Provider ID: 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**

**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**

**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*
*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): 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 Network*

**OPHTHALMOLOGY**

**HUYNH, PAUL**
*Provider ID: 295645*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 283-1303*
*Fax: (619) 283-1666*
*After Hours Phone: (619) 283-1303*
*Provider Gender: Male*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) 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**

**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**

**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) 609-7106*
*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*
*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**

**MOVAGHAR, MANSOOR**
*Provider ID: 216412*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Male*
*NPI: 1497792220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**
*Provider ID: 311099*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174152961*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**NAYER, ZACHARIA**
*Provider ID: 311098*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174152961*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPHTHALMOLOGY**

**OHALLORAN, HENRY**
*Provider ID: 205888*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Provider Gender: Male*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**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**

**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: (858) 450-1010*
*Fax: (858) 450-9451*
*After Hours Phone: (858) 450-1010*
*Provider Gender: Female*
*NPI: 1629509336*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*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: IHP of Southern Cal-PHP*

**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*
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: 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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, 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: (858) 565-8822*
*Fax: (858) 565-2449*
*After Hours Phone: (858) 565-8822*
*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: (858) 565-8822*
*Fax: (858) 565-2449*
*After Hours Phone: (858) 565-8822*
*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**

**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*

**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*

**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
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*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

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

**OPTOMETRIST**

**VO, ANDREW**
*Provider ID: 304147*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301684*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*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: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301683*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OPTOMETRIST**

**YU, CAROL**
*Provider ID: 301680*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

# D. Direktoryo ng Provider na Espesyalista

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**ORAL MAXILLOFACIAL SURGEON**

**DENTICO-OLIN, MARC**
*Provider ID: 304727*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
2878 CAMINO DEL RIO S STE 210
SAN DIEGO, CA 92108
*Phone: (619) 298-2200*
*Fax: (619) 298-2250*
*After Hours Phone: (619) 298-2200*
*Provider Gender: Male*
*NPI: 1629205174*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**ORAL MAXILLOFACIAL SURGEON**

**DENTICO-OLIN, MARC**
*Provider ID: 273663*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
501 WASHINGTON ST STE 710
SAN DIEGO, CA 92103
*Phone: (619) 295-6774*
*Fax: (619) 295-6776*
*After Hours Phone: (619) 295-6774*
*Provider Gender: Male*
*NPI: 1629205174*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**BLISS, MORGAN**
*Provider ID: 272565*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1760707657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**CALIFANO, JOSEPH**
*Provider ID: 299457*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*

# D. Direktoryo ng Provider na Espesyalista

200 W 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**

**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: 299461*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1881652972*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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
SAN DIEGO, CA 92123

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**CATES, DANIEL**
*Provider ID: 311486*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1821352907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**CHANG, EDWARD**
*Provider ID: 309535*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Male*
*NPI: 1528146008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 299582*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297330*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**COFFEY, CHARLES**
*Provider ID: 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**

**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**

**DECONDE, ADAM**
*Provider ID: 299568*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1588988919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**DECONDE, ADAM**
*Provider ID: 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**

**FRANK, ETHAN**
*Provider ID: 310278*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Male*
*NPI: 1720584345*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**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*
*Provider Language(s) Spoken: Spanish*
*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: 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*
*Provider Language(s) Spoken: Spanish*
*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: 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*
*Provider Language(s) Spoken: Spanish*
*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**

**FRIESEN, TZYYNONG**
*Provider ID: 272604*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1952740177*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 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*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299560*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GILANI, SAPIDEH**
*Provider ID: 299559*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003825571*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**
*Provider ID: 298396*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144583931*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**
*Provider ID: 298397*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144583931*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*

*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**GREENE, JACQUELINE**
*Provider ID: 272959*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144583931*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**
*Provider ID: 299576*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HARRIS, JEFFREY**
*Provider ID: 299575*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1417988783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299514*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

# D. Direktoryo ng Provider na Espesyalista

**HOM, DAVID**
*Provider ID: 299515*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HOM, DAVID**
*Provider ID: 299511*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 657-8590*
*After Hours Phone: (858) 657-8590*
*Provider Gender: Male*
*NPI: 1659305027*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HUSSEMAN, JACOB**
*Provider ID: 301052*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124034053*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**HUSSEMAN, JACOB**
*Provider ID: 301053*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1124034053*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

*PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**JIANG, WEN**
*Provider ID: 272660*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Female*
*NPI: 1659305753*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**KARI, ELINA**
*Provider ID: 299446*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*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: 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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780860536*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH 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: 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**

**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: 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): 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: 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**

**MATSUOKA, AKIHIRO**
*Provider ID: 299590*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299591*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**MATSUOKA, AKIHIRO**
*Provider ID: 299592*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1669630653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**PATEL, VIJAY**
*Provider ID: 297037*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Male*
*NPI: 1508250747*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**QIAN, ZHEN**
*Provider ID: 311002*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 309-7701*
*Fax: (858) 966-8038*
*After Hours Phone: (858) 309-7701*
*Provider Gender: Male*
*NPI: 1356796783*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299508*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN*

*SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**
*Provider ID: 299509*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1346506920*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**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: 299639*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-6631*
*After Hours Phone: (619) 543-6631*
*Provider Gender: Female*

*NPI: 1346270816*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**OTOLARYNGOLOGY**

**WATSON, DEBORAH**
*Provider ID: 299642*
*Board Certified 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**

**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: 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*

**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*
*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**

# D. Direktoryo ng Provider na Espesyalista

**FADARE, OLUWOLE**
*Provider ID: 275705*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-5764*
*Fax: (619) 543-5249*
*After Hours Phone: (619) 543-5764*
*Provider Gender: Male*
*NPI: 1619955804*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**HANSEN, LAWRENCE**
*Provider ID: 275767*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-5764*
*After Hours Phone: (619) 543-5764*
*Provider Gender: Male*
*NPI: 1760407498*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**PARAST, MANA**
*Provider ID: 275888*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1629163100*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**WONG, RICHARD**
*Provider ID: 243202*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1275084295*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**ALLEN, ELIZABETH**
*Provider ID: 275756*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174814065*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**BROOME, HELEN**
*Provider ID: 275720*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184674145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**

**CLINICAL**

**BROOME, HELEN**
*Provider ID: 275721*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1184674145*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC**
**CLINICAL**

**BUI, JACK**
*Provider ID: 247581*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
10300 CAMPUS POINT DR

SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1942529821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**BUI, JACK**
*Provider ID: 247580*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1942529821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PATHOLOGY ANATOMIC CLINICAL**

**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 THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/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 CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 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: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*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*
*Min/Max Age: 0\19*
*American Sign Language (ASL):*

# D. Direktoryo ng Provider na Espesyalista

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**GENG, BOB**
*Provider ID: 205823*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5776 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (858) 292-1144*
*After Hours Phone: (858) 292-1144*
*Provider Gender: Male*
*NPI: 1356570758*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**GREINER, ALEXANDER**
*Provider ID: 205697*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5776 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (858) 966-4900*
*After Hours Phone: (858) 966-4900*
*Provider Gender: Male*
*NPI: 1609801299*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-12PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**LEIBEL, SYDNEY**
*Provider ID: 205724*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
5776 RUFFIN RD
SAN DIEGO, CA 92123
*Phone: (858) 292-1144*
*After Hours Phone: (858) 292-1144*
*Provider Gender: Male*
*NPI: 1861666919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ALLERGY / IMMUNOLOGY**

**LEIBEL, SYDNEY**
*Provider ID: 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 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**

**DUMMER, KIRSTEN**
*Provider ID: 260595*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1780642280*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**GOLDING, IAN**
*Provider ID: 210823*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1962974956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**GORDON, BRENT**
*Provider ID: 295391*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1669480083*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SANTA MONICA UCLA MED CTR, SAN ANTONIO COMM HOSP, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
*Provider ID: 205687*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Female*
*NPI: 1023329885*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**JUSTINO, HENRI**
*Provider ID: 284123*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1518036821*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**LEHNERTSCHUCHARDT, 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*

# D. Direktoryo ng Provider na Espesyalista

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**MCCANDLESS, RACHEL**

*Provider ID: 206147*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-4912*

*Fax: (858) 966-7903*

*After Hours Phone: (858) 966-4912*

*Provider Gender: Female*

*NPI: 1487821815*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**

*Provider ID: 205349*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5855*

*Fax: (858) 966-7903*

*After Hours Phone: (858) 966-5855*

*Provider Gender: Male*

*NPI: 1376705707*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**SILVASEPULVEDA, 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*

*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**

**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**

**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*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC CARDIOLOGY**

**YOUNOSZAI, ADEL**
*Provider ID: 303133*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5855*
*Fax: (858) 966-7903*
*After Hours Phone: (858) 966-5855*
*Provider Gender: Male*
*NPI: 1952493819*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Direktoryo ng Provider na Espesyalista

## PEDIATRIC DERMATOLOGY

**EICHENFIELD, DAWN**

*Provider ID: 283142*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-6795*

*Fax: (858) 966-7479*

*After Hours Phone: (858) 966-6795*

*Provider Gender: Female*

*NPI: 1295198091*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 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 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**

**ALAYARI, AMETHYST**
*Provider ID: 311382*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1740778653*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**AMIRNOVIN, RAMBOD**
*Provider ID: 297673*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1629104492*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, LOMA LINDA 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**

**BIALOSTOZKY, MARIO**
*Provider ID: 206011*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1609281450*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**BRYL, AMY**
*Provider ID: 205967*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1497079487*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL 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**

**CAMPBELL, SARA**
*Provider ID: 206335*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1841687563*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CHOO, SUN**
*Provider ID: 296535*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1700047628*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**CHOO, SUN**
*Provider ID: 296536*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1700047628*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\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**

**CONRAD, HEATHER**
*Provider ID: 205960*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1205813409*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

# D. Direktoryo ng Provider na Espesyalista

**CRAWFORD, MICHAEL**
*Provider ID: 311159*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**CRAWFORD, MICHAEL**
*Provider ID: 311158*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1336727791*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DELRE, 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*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**DEVERA, GEMMIE**
*Provider ID: 288572*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY

SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1366622078*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*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**

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**FISHER, JAY**
*Provider ID: 295690*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1629118518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**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*
*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**

**HERSKOVITZ, SCOTT**
*Provider ID: 261045*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*

# D. Direktoryo ng Provider na Espesyalista

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*

**PEDIATRIC EMERGENCY MEDICINE**

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**ISHIMINE, PAUL**
*Provider ID: 206236*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1437184421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**KHAN, SHAHFAR**
*Provider ID: 294094*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1013361815*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**KINGDON, JOANNA**
*Provider ID: 302317*
*Board Certified Specialty: 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: 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**

**KRAK, MICHAEL**
*Provider ID: 310975*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1063094225*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MCDANIEL, MICHELE**
*Provider ID: 248071*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH*

*NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1366761959*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*
*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**

**MCEVOY, ANNE**
*Provider ID: 310789*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1861888471*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**MENDES, CHANTAL**
*Provider ID: 295668*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1134681265*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Provider Language(s) Spoken: Gujarati*
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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 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, RONALD**
*Provider ID: 295457*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Male*
*NPI: 1881695914*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*
*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
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*

**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*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS*

*HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
*Provider ID: 311083*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2905*
*Fax: (619) 283-1614*
*After Hours Phone: (619) 280-2905*
*Provider Gender: Female*
*NPI: 1477626513*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): 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**

**ROBERTS, CALE**
*Provider ID: 310782*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1316430499*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*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**

**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*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RUSSELL, SAMUEL**

*Provider ID: 301249*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1215564265*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**RUSSELL, SAMUEL**

*Provider ID: 301250*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

*Phone: (619) 280-2905*

*Fax: (619) 283-1614*

*After Hours Phone: (619) 280-2905*

*Provider Gender: Male*

*NPI: 1215564265*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 1PM-10PM*
*M-F 4PM-10PM*
*SA 1PM-10PM*

*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SALEH, FAREED**

*Provider ID: 206216*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8800*

*After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1366691115*

*Provider English Spoken: Y*

# D. Direktoryo ng Provider na Espesyalista

*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**SHERER, KIMBERLY**
*Provider ID: 284168*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1992202964*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**SHETH, SARIKA**
*Provider ID: 248171*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1336503234*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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: 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*

**PEDIATRIC EMERGENCY MEDICINE**

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**TAMAS, VANESSA**
*Provider ID: 206212*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Female*
*NPI: 1326225368*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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 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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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**
*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*

**PEDIATRIC EMERGENCY MEDICINE**

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**VANWOY, 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*

**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: 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*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

# D. Direktoryo ng Provider na Espesyalista

**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*

**PEDIATRIC EMERGENCY MEDICINE**

**VEGA, CAROLINA**
*Provider ID: 310690*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1427442086*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*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**

**WANG, YVETTE**
*Provider ID: 263416*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*

# D. Direktoryo ng Provider na Espesyalista

*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*

**PEDIATRIC EMERGENCY MEDICINE**

**WANG, VINCENT**
*Provider ID: 309661*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1083713655*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC EMERGENCY MEDICINE**

**WONG, VANESSA**
*Provider ID: 310976*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8030*
*Fax: (858) 966-8389*
*After Hours Phone: (858) 966-8030*
*Provider Gender: Female*
*NPI: 1154680650*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSPITAL OF ORANGE COUNTY, UNIVERSITY OF CALIFORNIA IRVINE 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 EMERGENCY MEDICINE**

**YAPHOCKUN, KARENKIM**
*Provider ID: 206184*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*After Hours Phone: (858) 576-1700*
*Provider Gender: Female*
*NPI: 1861880817*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**ARAFAH, DEEMA**
*Provider ID: 310289*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1235423856*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**RANADIVE, SAYALI**
*Provider ID: 311394*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Provider Gender: Female*
*NPI: 1588846380*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Hindi, Marathi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC ENDOCRINOLOGY**

**VARGASTRUJILLO, 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**

**DICKERSON, ANDREW**
*Provider ID: 310617*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*Fax: (858) 966-7433*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**DICKERSON, ANDREW**
*Provider ID: 310619*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1063916633*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

# D. Direktoryo ng Provider na Espesyalista

**GASTROENTEROLOGY**

**HARTMANN, PHILLIPP**
*Provider ID: 294228*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1356796536*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, German*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**JAZAYERI, AMIR**
*Provider ID: 310952*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1316385925*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC GASTROENTEROLOGY**

**KATIBIAN, DAVID**
*Provider ID: 310954*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Male*
*NPI: 1073019279*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**SCHWARZ, KATHLEEN**
*Provider ID: 205885*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-4003*
*Fax: (858) 560-6798*
*After Hours Phone: (858) 966-4003*
*Provider Gender: Female*
*NPI: 1265465918*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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):*

# D. Direktoryo ng Provider na Espesyalista

*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*
*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**

**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**

**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*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**GANESAN, ANUSHA**
*Provider ID: 205882*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1982091740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**JAFFRAY, JULIE**
*Provider ID: 296760*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1396942470*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**KUO, DENNIS**
*Provider ID: 205433*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1750492146*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**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 PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**LIOU, ANGELA**
*Provider ID: 310982*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1598150450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**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*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**WONG, VICTOR**
*Provider ID: 206149*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Male*
*NPI: 1154692473*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC HEMATOLOGY / ONCOLOGY**

**YU, 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
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 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**

**CRANE, CLARKSON**
*Provider ID: 311377*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8574*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8574*
*Provider Gender: Male*
*NPI: 1689036436*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

# D. Direktoryo ng Provider na Espesyalista

**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**

**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, UCSF MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC NEPHROLOGY**

**RASCHKE, ROBIN**
*Provider ID: 310300*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8574*
*Fax: (858) 966-7789*
*After Hours Phone: (858) 966-8574*
*Provider Gender: Female*
*NPI: 1609365402*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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**

**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*
*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**

# D. Direktoryo ng Provider na Espesyalista

**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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**LANDEOGUTIERREZ, 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**

**LANDEOGUTIERREZ, JEREMY**
*Provider ID: 284177*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Male*
*NPI: 1255750360*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRIC PULMONOLOGY**

**LENHART-PENDERGRASS, PATRICIA**
*Provider ID: 294641*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-5846*
*Fax: (858) 966-8457*
*After Hours Phone: (858) 966-5846*
*Provider Gender: Female*
*NPI: 1144615659*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): 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: 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**

**RAO, APARNA**

*Provider ID: 206123*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5846*

*Fax: (858) 569-9052*

*After Hours Phone: (858) 966-5846*

*Provider Gender: Female*

*NPI: 1649222340*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*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*

*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**

**LEVY, AVIYA**
*Provider ID: 310780*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8082*
*Fax: (858) 966-6791*
*After Hours Phone: (858) 966-8082*
*Provider Gender: Female*
*NPI: 1144726936*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*

**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*
*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**

**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\21*
*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\21*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**BEAUCHAMP-WALTERS, JULIA**
*Provider ID: 270063*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*

*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1457420713*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*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*

# D. Direktoryo ng Provider na Espesyalista

**PEDIATRICS**

**CHONG, AMY**
*Provider ID: 259993*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5803*
*Fax: (858) 966-5992*
*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: 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**

**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**

**DOSHI, AMI**
*Provider ID: 205330*
*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: 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*IPA: Rady Childrens Health Network*

**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**

**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**

**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**

**GRAY, SARAH**
*Provider ID: 284224*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1508210311*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**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*

**PEDIATRICS**

**JIMENEZBACARDI, 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*

**PEDIATRICS**

**JINDAL, ANUJA**
*Provider ID: 303285*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-5819*
*Fax: (858) 966-4930*
*After Hours Phone: (858) 966-5819*
*Provider Gender: Female*
*NPI: 1194046581*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**KARMAKAR, KANKA**
*Provider ID: 213847*
*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: 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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MANNINOAVILA, ELIZABETH**
*Provider ID: 262161*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1164747127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MARANO, RACHEL**
*Provider ID: 302438*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1043673528*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MILLS, TATYANA**
*Provider ID: 310308*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1962964999*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**MILLS, TATYANA**

*Provider ID: 310307*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1962964999*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**NGO, MAI**

*Provider ID: 302113*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*Fax: (858) 966-4051*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1508910787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**PATEL, AARTI**

*Provider ID: 205865*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1871813105*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**PIERCE, HEATHER**
*Provider ID: 205701*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1699955542*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**POLICH, MICHELLE**
*Provider ID: 286390*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1780118018*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**POOLE, DAVID**
*Provider ID: 311153*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Male*
*NPI: 1033613765*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health*

*Network*

**PEDIATRICS**

**RHEE, KYUNG**
*Provider ID: 206114*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1013996529*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**RIES, DAVID**
*Provider ID: 206082*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Male*
*NPI: 1376705483*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PEDIATRICS**

**RUNGVIVATJARUS, TIRANUN**
*Provider ID: 206319*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*Fax: (858) 966-6728*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1407276363*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**STOVER, LAURIE**
*Provider ID: 206196*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-5841*
*After Hours Phone: (858) 966-5841*
*Provider Gender: Female*
*NPI: 1659442317*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN*

*DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**ALGRA, JEFFREY**
*Provider ID: 287524*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Male*
*NPI: 1457664518*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**BIFFL, SUSAN**
*Provider ID: 287453*
*Board Certified Specialty: No*
*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*

**PHYSICAL MEDICINE / REHABILITATION**

**DALAL, PRITHA**
*Provider ID: 287523*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1609017532*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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: 295276*

*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
*Phone: (619) 325-1161*
*Fax: (619) 325-1717*
*After Hours Phone: (619) 325-1161*
*Provider Gender: Male*
*NPI: 1407052459*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICAL MEDICINE / REHABILITATION**

**RYAN, KYLE**
*Provider ID: 287520*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Male*
*NPI: 1447645742*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**SCOTT-WYARD, PHOEBE**
*Provider ID: 287519*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Female*
*NPI: 1336356203*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICAL MEDICINE / REHABILITATION**

**SKALSKY, ANDREW**
*Provider ID: 287537*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7910 FROST ST STE 195
SAN DIEGO, CA 92123
*Phone: (858) 966-8974*
*After Hours Phone: (858) 966-8974*
*Provider Gender: Male*
*NPI: 1487635272*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**AINSWORTH, DELISSA**
*Provider ID: 243367*
*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: PALOMAR MEDICAL CENTER, SCRIPPS*

*MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**BOYD, LISA**
*Provider ID: 217649*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1871859421*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**BRUECKNER, TAMMIE**
*Provider ID: 255558*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1407212376*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**CASTILLO, PATRICIA**
*Provider ID: 257530*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
3544 30TH ST
SAN DIEGO, CA 92104
*Phone: (619) 515-2424*
*After Hours Phone: (619) 515-2424*
*Provider Gender: Female*
*NPI: 1376550657*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8:30AM-5:30PM F 8:30AM-5PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**PHYSICIANS ASSISTANT**

**DERISSI, DANA**
*Provider ID: 301632*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*

*Provider Gender: Female*
*NPI: 1063829505*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Farsi, Persian*
*Cultural Competency: N*
*Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**DU, SARAH**
*Provider ID: 310603*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1295502763*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**GEBAUER, HEATHER**
*Provider ID: 311550*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467987586*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**GEBAUER, HEATHER**
*Provider ID: 311549*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1467987586*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**GUTH, CARA**
*Provider ID: 299111*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
*Phone: (858) 455-6460*
*Fax: (858) 455-5362*
*After Hours Phone: (858) 455-6460*
*Provider Gender: Female*
*NPI: 1992177182*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 21\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HASEGAWA, CHRIS**
*Provider ID: 247206*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225698962*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HASEGAWA, CHRIS**
*Provider ID: 287349*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1225698962*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**HIGGINS, JOSHUA**
*Provider ID: 287133*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
203 W F ST
SAN DIEGO, CA 92101
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1861624181*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**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*

**PHYSICIANS ASSISTANT**

**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: 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*

**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, 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**

**LEE, JENNIFER**
*Provider ID: 309998*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1265081871*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**LINDEMANN, CHRISTINA**
*Provider ID: 283760*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (858) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1194373514*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**MARTIN, HALEY**
*Provider ID: 305026*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1093440836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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*
*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*

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*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*

**PHYSICIANS ASSISTANT**

**MOREO, HUNTER**

*Provider ID: 310726*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128

*Phone: (858) 485-0554*

*Fax: (858) 429-7933*

*After Hours Phone: (858) 485-0554*

*Provider Gender: Female*

*NPI: 1043062334*

*Provider English Spoken: Y*

*Cultural Competency: N*

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

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**MOREO, HUNTER**

*Provider ID: 310136*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128

*Phone: (858) 485-0554*

*Fax: (858) 429-7933*

*After Hours Phone: (858) 485-0554*

*Provider Gender: Female*

*NPI: 1043062334*

*Provider English Spoken: Y*

*Cultural Competency: N*

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

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NAKAMITSU, ABIGAIL**

*Provider ID: 268666*

*Board Certified 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*

# D. Direktoryo ng Provider na Espesyalista

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**NGUYEN, KHANH**
*Provider ID: 310049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427312644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**NGUYEN, KHANH**
*Provider ID: 310050*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427312644*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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**

**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 VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 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*

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# D. Direktoryo ng Provider na Espesyalista

**PHYSICIANS ASSISTANT**

**PELIO, DARREN**

*Provider ID: 293444*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

*Phone: (800) 926-8278*

*Fax: (888) 539-8786*

*After Hours Phone: (800) 926-8278*

*Provider Gender: Male*

*NPI: 1386791028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**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**

**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**

**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: 16\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**PHUNG, AIVI**

*Provider ID: 293246*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 810-8700*

*Provider Gender: Female*

*NPI: 1639528110*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**POGGI, SARA**
*Provider ID: 310631*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1265119911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**POGGI, SARA**
*Provider ID: 310614*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
*Phone: (858) 909-0770*
*Fax: (858) 909-0880*
*After Hours Phone: (858) 909-0770*
*Provider Gender: Female*
*NPI: 1265119911*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**PRIEST, VIVIAN**
*Provider ID: 272430*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1225581754*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 20\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**QUIJANO, GLENN**
*Provider ID: 307067*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
*Phone: (858) 571-3630*
*Fax: (858) 295-3948*
*After Hours Phone: (858) 571-3630*
*Provider Gender: Male*
*NPI: 1407466030*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**ROBERTS, AUDREY**
*Provider ID: 253253*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-7777*
*After Hours Phone: (619) 543-7777*
*Provider Gender: Female*
*NPI: 1265960256*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**RODRIGUES, ANNETTE**
*Provider ID: 302452*
*Board Certified 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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**SCHMITT, EVA**
*Provider ID: 264176*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1174715106*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German*
*Cultural Competency: N*
*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**PHYSICIANS ASSISTANT**

**SCHROEDER, JENNIFER**
*Provider ID: 256640*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780851253*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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: 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**

**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**

**SHAPIRO, RACHEL**
*Provider ID: 311469*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1720488836*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**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**

**TAN, CARMELA**
*Provider ID: 311088*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811069271*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**
*Provider ID: 311089*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811069271*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PHYSICIANS ASSISTANT**

**TAN, CARMELA**
*Provider ID: 311091*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811069271*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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*

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*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: 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**

**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) 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: 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**

**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**

**WRIGHT, DEREK**
*Provider ID: 310777*
*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: 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*

**PHYSICIANS ASSISTANT**

**WRIGHT, DEREK**
*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): 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: 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*
*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: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**PREVENTATIVE MEDICINE GENERAL**

**ROMERO, CAMILA**
*Provider ID: 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: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

**PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER**

**SIETSMA, ALEXANDRA**
*Provider ID: 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*

**PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER**

**SIETSMA, ALEXANDRA**
*Provider ID: 276908*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932522778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**ABERCROMBIE, SHERI**
*Provider ID: 293400*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**ABERCROMBIE, SHERI**
*Provider ID: 290770*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**BANKS, SARAH**
*Provider ID: 304195*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**BANKS, SARAH**
*Provider ID: 203173*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1164701132*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**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*

**PSYCHOLOGIST**

**BASS, GURGIANA**
*Provider ID: 290752*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**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: Female*

*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4:30PM*
*TU 8AM-12PM*
*W 8AM-4:30PM*
*TH 8AM-12PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**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) 234-0206*
*After Hours Phone: (619) 234-2158*
*Provider Gender: Male*
*NPI: 1235364712*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**DIOKNO, RHODA**
*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) 234-0206*
*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*

**PSYCHOLOGIST**

**FIRESTONE, MICHELLE**
*Provider ID: 290773*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FIRESTONE, MICHELLE**
*Provider ID: 290954*
*Board Certified 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: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FORZANI, CHRISTINA**
*Provider ID: 290780*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Provider Gender: Female*
*NPI: 1902939630*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GIAMONA, KRISTEN**
*Provider ID: 290801*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GIAMONA, KRISTEN**
*Provider ID: 294171*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**GOMEZ, JUANITA**
*Provider ID: 291424*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8372*
*Provider Gender: Female*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**KLUEMPER, NICOLE**
*Provider ID: 290792*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**KLUEMPER, NICOLE**
*Provider ID: 296237*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Female*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**LABIB, MICHAEL**
*Provider ID: 301617*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 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*

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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*
*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**

**MCCULLUM, TIFFANY**
*Provider ID: 290689*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 428-7952*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1528306206*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 13\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**MEIER, EMILY**
*Provider ID: 311351*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255530572*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**MONTOYA, JESSICA**
*Provider ID: 274619*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1003421256*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**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: 18\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: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**NORMAN, MARC**
*Provider ID: 276869*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1922169101*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PSYCHOLOGIST**

**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**

**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: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**PRINCE, RENEE**
*Provider ID: 303603*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1467737908*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**PSYCHOLOGIST**

**RADOJEVIC, NATASHA**
*Provider ID: 290690*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Provider Gender: Female*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

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# D. Direktoryo ng Provider na Espesyalista

**PSYCHOLOGIST**

**RADOJEVIC, NATASHA**

*Provider ID: 306574*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-0925*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-0925*

*Provider Gender: Female*

*NPI: 1821365008*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**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: 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*

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# D. Direktoryo ng Provider na Espesyalista

**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*

*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**

**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*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 5\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TO, TUAN**

*Provider ID: 290284*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 810-8700*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 810-8700*

*Provider Gender: Male*

*NPI: 1255696183*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 5\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TO, TUAN**

*Provider ID: 290285*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Provider Gender: Male*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TWAMLEY, ELIZABETH**
*Provider ID: 290717*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Provider Gender: Female*
*NPI: 1700089141*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8:30AM-5PM*
*TH 8:30AM-9PM*
*F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PUBLIC HEALTH PREVENTATIVE MEDICINE**

**SOZANSKI, JESSE**
*Provider ID: 200925*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437446622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**BAILEY, JACOB**
*Provider ID: 299923*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598150039*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**BAILEY, JACOB**
*Provider ID: 299924*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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: 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**

**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**

**LE, HUAN**
*Provider ID: 300636*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115
*Phone: (619) 582-1448*
*Fax: (619) 582-1081*
*After Hours Phone: (619) 582-1448*
*Provider Gender: Male*
*NPI: 1780797381*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 9AM-5PM*
*TH 8AM-1PM*
*F 9AM-6PM*
*SA 8AM-11AM*
*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PULMONARY DISEASES**

**LE, HUAN**
*Provider ID: 27358*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115
*Phone: (619) 582-1448*
*Fax: (619) 582-1081*
*After Hours Phone: (619) 582-1448*
*Provider Gender: Male*
*NPI: 1780797381*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish, Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\99*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 9AM-5PM TH 8AM-1PM F 9AM-6PM SA 8AM-11AM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**PULMONARY DISEASES**

**LI, JINGHONG**
*Provider ID: 311032*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1619014479*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**PULMONARY DISEASES**

**MCGUIRE, WILLIAM**
*Provider ID: 299986*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W 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

**RADIATION ONCOLOGY**

**CARMONA, RUBEN**
Provider ID: 303100
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7901 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (619) 740-8499
After Hours Phone: (858) 939-5010
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

**RADIATION ONCOLOGY**

**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: 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 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: 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**

**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**

**TRINGALE, KATHRYN**
*Provider ID: 306883*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
9730 SUMMERS RIDGE RD
STE 101
SAN DIEGO, CA 92121
*Phone: (858) 345-2445*
*Fax: (858) 578-1144*
*After Hours Phone: (858)*

*345-2445*
*Provider Gender: Female*
*NPI: 1780172031*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**ADAMS, STEPHEN**
*Provider ID: 311197*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1376689778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ADAMS, STEPHEN**
*Provider ID: 311196*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1376689778*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR, Highland Hospital, Alameda Hospital, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ALFIDI, MARY**
*Provider ID: 310666*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1992814396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**AWWAD, REEM**
*Provider ID: 311084*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811158967*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**AWWAD, REEM**
*Provider ID: 311085*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1811158967*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BERMAN, ZACHARY**
*Provider ID: 269318*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W 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**

**BERMAN, ZACHARY**
*Provider ID: 304163*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1033521190*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BISSET, LOGAN**
*Provider ID: 311143*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356760276*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BISSET, LOGAN**
*Provider ID: 311144*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1356760276*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BONE, SAMUEL**
*Provider ID: 311166*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841216306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BONE, SAMUEL**
*Provider ID: 311165*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1841216306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: GEORGE L MEE MEMORIAL HOSP, UC DAVIS MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BRANCH, CODY**
*Provider ID: 283675*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851770622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BRANCH, CODY**
*Provider ID: 304199*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851770622*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BROWN, TERESA**
*Provider ID: 311080*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669492237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**BROWN, TERESA**
*Provider ID: 311079*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1669492237*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SAN LEANDRO HOSPITAL, Highland Hospital, Alameda Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARLSON, BLAKE**
*Provider ID: 311134*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548249956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Eisenhower Medical Center*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARLSON, BLAKE**
*Provider ID: 311135*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548249956*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Eisenhower Medical Center*
*Medi-Cal Open 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*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 303054*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation:*
*EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CARSWELL, AIMEE**
*Provider ID: 303055*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (858) 554-1212*
*Fax: (858) 795-1195*
*After Hours Phone: (858) 554-1212*
*Provider Gender: Female*
*NPI: 1619156635*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation:*
*EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

# D. Direktoryo ng Provider na Espesyalista

**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: 283226*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHENG, KAREN**
*Provider ID: 304207*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1427430511*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**CHEWNING, RUSH**
*Provider ID: 301914*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8863*
*Fax: (858) 966-8863*
*After Hours Phone: (858) 966-8863*
*Provider Gender: Male*
*NPI: 1083872212*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**RADIOLOGY DIAGNOSTIC**

**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: 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**

**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*
*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**

**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**

**FOWLER, KATHRYN**
*Provider ID: 201289*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255457941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**FOWLER, KATHRYN**
*Provider ID: 201291*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1255457941*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GERST, SCOTT**
*Provider ID: 311148*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184602872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GERST, SCOTT**
*Provider ID: 311147*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184602872*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311593*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311594*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GORDON, EMILE**
*Provider ID: 311595*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184121899*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GRISSOM, MURRAY**
*Provider ID: 271569*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720465396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**GRISSOM, MURRAY**
*Provider ID: 271567*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1720465396*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**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**

**HANNSUN, GEMMY**
*Provider ID: 282791*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992120026*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Khmer, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANSCH, ERNST**
*Provider ID: 311121*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366428351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HANSCH, ERNST**
*Provider ID: 311120*
*Board Certified Specialty: Yes*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1366428351*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, MOUNTAINS COMMUNITY HOSP, EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HELMY, MARWAH**
*Provider ID: 311096*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841276730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, REGIONAL MEDICAL CTR OF SAN JOSE, MARK TWAIN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**HELMY, MARWAH**
*Provider ID: 311095*
*Board Certified Specialty: No*

# D. Direktoryo ng Provider na Espesyalista

*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1841276730*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: DOCTORS MEDICAL CENTER, Providence St Jude Medical Center, Parkview Community Hospital Medical Center, ST BERNARDINE MED CTR, COMMUNITY HOSP OF SAN BERNARDINO, KINDRED HOSPITAL ONTARIO, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, ST JOSEPHS MEDICAL CENTER, REGIONAL MEDICAL CTR OF SAN JOSE, MARK TWAIN 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**

**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 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**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*
*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: 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**

**KONDILI, DHIMITER**
*Provider ID: 283143*
*Board Certified Specialty: No*

# D. Direktoryo ng Provider na Espesyalista

*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699125450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**KONDILI, DHIMITER**
*Provider ID: 283145*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1699125450*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**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*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**RICKMAN, CHRISTOPHER**
*Provider ID: 311168*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*

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*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497759898*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital, SUTTER COAST HOSPITAL, SUTTER LAKESIDE HOSP, SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ, MEMORIAL HOSPITAL MED CTR, EISENHOWER MEDICAL CTR, Alameda Hospital, Alameda Hospital, Highland Hospital, SAN LEANDRO HOSPITAL, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**RICKMAN, CHRISTOPHER**
*Provider ID: 311169*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497759898*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: Providence St Joseph Hospital, SUTTER COAST HOSPITAL, SUTTER LAKESIDE HOSP, SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ, MEMORIAL HOSPITAL MED CTR, EISENHOWER MEDICAL CTR, Alameda Hospital, Alameda Hospital, Highland Hospital, SAN LEANDRO HOSPITAL, SAN LEANDRO HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**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**

**ROZELL, JOSEPH**
*Provider ID: 311178*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1629368519*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**ROZELL, JOSEPH**
*Provider ID: 311179*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1629368519*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: EISENHOWER MEDICAL CTR*
*Medi-Cal Open 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: 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*

**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**

**SCHULTZ, HEATHER**
*Provider ID: 240342*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800)*

*926-8273*
*Provider Gender: Female*
*NPI: 1871910810*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT 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: 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**

**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**

**SLATER, JERRY**
*Provider ID: 283310*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851746382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SLATER, JERRY**
*Provider ID: 283312*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1851746382*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SPENGLER, NATHAN**
*Provider ID: 303049*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1992919666*
*Provider English Spoken: Y*
*Cultural Competency: N*
*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**
*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**

**STEPENOSKY, JAMES**
*Provider ID: 309702*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*

*NPI: 1598738577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**STEPENOSKY, JAMES**
*Provider ID: 309703*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1598738577*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open 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*
*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**

**SUN, ALEX**
*Provider ID: 311562*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2218*
*After Hours Phone: (619) 543-2218*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311565*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**SUN, ALEX**
*Provider ID: 311564*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
*Phone: (619) 471-9240*
*After Hours Phone: (619) 471-9240*
*Provider Gender: Male*
*NPI: 1538502331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, GROSSMONT HOSPITAL, GROSSMONT HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**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: 240408*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 304179*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 240405*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1386987261*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**TADDONIO, MICHAEL**
*Provider ID: 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**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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

**RADIOLOGY DIAGNOSTIC**

**TADROS, ANTHONY**
*Provider ID: 304150*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1306112057*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**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 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**

**VAHDAT, NOUSHIN**
*Provider ID: 300070*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1396700852*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**RADIOLOGY DIAGNOSTIC**

**VAHDAT, NOUSHIN**

*Provider ID: 300071*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

200 W ARBOR DR
SAN DIEGO, CA 92103

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1396700852*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open 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**

**YOO, RAPHAEL**

*Provider ID: 310111*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3010 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

*Phone: (858) 966-8863*

*Fax: (858) 966-7903*

*After Hours Phone: (858) 966-8863*

*Provider Gender: Male*

*NPI: 1154559037*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max 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**

**YOO, RAPHAEL**

*Provider ID: 310112*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-8863*
*Fax: (858) 966-8863*
*After Hours Phone: (858) 966-8863*
*Provider Gender: Male*
*NPI: 1154559037*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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**

**YORK, VINCENT**
*Provider ID: 283517*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
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*

**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*

**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, UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, VALLEY CHILDRENS HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

# D. Direktoryo ng Provider na Espesyalista

**RADIOLOGY DIAGNOSTIC**

**ZAPALA, MATTHEW**

*Provider ID: 307678*

*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: 1346482809*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, VALLEY CHILDRENS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**RADIOLOGY DIAGNOSTIC**

**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, UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, VALLEY CHILDRENS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: UCSD Medical Group*

**REGISTERED DIETITIAN / NUTRITIONIST**

**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*

**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**

**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**

**SHMARIAHU, SHELLY**
*Provider ID: 310802*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Provider Gender: Female*
*NPI: 1881457521*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**REGISTERED DIETITIAN / NUTRITIONIST**

**SIEVERING, DENISE**
*Provider ID: 268250*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4168 FRONT ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 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**

**BALL, STEPHEN**
*Provider ID: 311013*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437644044*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BARTZ, BRYAN**
*Provider ID: 273381*
*Board Certified 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*
*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**

**BOEHMER, ALEXANDRA**
*Provider ID: 311058*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1528789856*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**
*Provider ID: 258304*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780018416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**BUNOSKY, ABIGAIL**
*Provider ID: 246022*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1780018416*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**CORTEZ, AARON**
*Provider ID: 279194*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1639693187*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**REGISTERED PHYSICAL THERAPIST**

**COSTELLO, MARK**
*Provider ID: 295634*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
7510 CLAIREMONT MESA BLVD STE 103
SAN DIEGO, CA 92111
*Phone: (818) 894-2273*
*Fax: (818) 357-2505*
*After Hours Phone: (818) 894-2273*
*Provider Gender: Male*
*NPI: 1710193602*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Armenian, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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*
*IPA: UCSD Medical Group*

**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 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*

**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): 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*

# D. Direktoryo ng Provider na Espesyalista

*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*
*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: 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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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**

**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*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SPEECH PATHOLOGIST**

**DURNAN, CASSANDRA**
*Provider ID: 307885*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8929 AERO DR STE E
SAN DIEGO, CA 92123
*Phone: (877) 757-8353*
*Fax: (818) 357-2505*
*After Hours Phone: (877) 757-8353*
*Provider Gender: Female*
*NPI: 1073873501*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 7AM-7PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SPEECH PATHOLOGIST**

**SCHIEDERMAYER, BENJAMIN**
*Provider ID: 288937*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1164979837*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/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: 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**

**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*
*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*
*Medi-Cal Open Panel: Yes*
*Min/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*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**PARRY, LISA**
*Provider ID: 286341*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**PARRY, LISA**
*Provider ID: 278553*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1235369067*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY COLON SURGERY**

**RAMAMOORTHY, SONIA**
*Provider ID: 286370*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 529-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1801812656*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**ADAMS, LAURA**
*Provider ID: 284407*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1144616541*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**MASCH, JESSICA**
*Provider ID: 311552*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1902300445*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**POTENZA, BRUCE**
*Provider ID: 277298*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-7200*
*After Hours Phone: (619) 543-7200*
*Provider Gender: Male*
*NPI: 1548281496*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY CRITICAL CARE**

**VENTRO, GEORGE**
*Provider ID: 284418*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1548604648*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**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*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**BARNES, RYAN**
*Provider ID: 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**

**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**

**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**

**BENCH, SHAWN**
*Provider ID: 299895*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
7910 FROST ST STE 250
SAN DIEGO, CA 92123
*Phone: (858) 565-0104*
*Fax: (858) 565-0194*
*After Hours Phone: (858) 565-0104*
*Provider Gender: Male*
*NPI: 1669700753*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-5PM F 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**BERUMEN, JENNIFER**
*Provider ID: 260052*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8001 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 966-5811*
*Fax: (858) 966-8035*
*After Hours Phone: (858) 966-5811*
*Provider Gender: Female*
*NPI: 1558566372*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY GENERAL**

**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**

**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
*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**

**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*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**
*Provider ID: 304608*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120
*Phone: (619) 500-7699*
*Fax: (619) 483-3997*
*After Hours Phone: (619) 500-7699*
*Provider Gender: Male*
*NPI: 1437470762*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**
*Provider ID: 304609*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
*Phone: (619) 582-4490*
*Fax: (619) 501-9702*
*After Hours Phone: (619) 582-4490*
*Provider Gender: Male*
*NPI: 1437470762*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, 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**

**GARCIA CABRERA, ANA**
*Provider ID: 311499*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1205330354*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HOLLANDSWORTH, HANNAH**
*Provider ID: 310729*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1972954303*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**HORGAN, SANTIAGO**
*Provider ID: 286367*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932297231*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**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*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**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**

**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**

**MUELLER, GEORGE**

*Provider ID: 54298*

*Board Certified Specialty: No*

*SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC*

7910 FROST ST STE 250
SAN DIEGO, CA 92123

*Phone: (858) 565-0104*

*Fax: (858) 565-0194*

*After Hours Phone: (858) 565-0104*

*Provider Gender: Male*

*NPI: 1629179684*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

*Hospital Affiliation: SHARP MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:30AM-5PM F 8:30AM-4PM*

*Website: N/A*

*IPA: Community Care IPA LLC, 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**

**REEVES, JAMES**
*Provider ID: 311505*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1174059257*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANDLER, BRYAN**
*Provider ID: 286357*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043410186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**SANDLER, BRYAN**
*Provider ID: 286383*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1043410186*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*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): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY HAND**

**CAGE, DORI**
*Provider ID: 296731*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
8008 FROST ST STE 403
SAN DIEGO, CA 92123
*Phone: (858) 715-9200*
*Fax: (858) 715-9202*
*After Hours Phone: (858) 715-9200*
*Provider Gender: Female*
*NPI: 1871592253*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*

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*IPA: IHP of Southern Cal-PHP*

**SURGERY HAND ORTHOPEDIC**

**STEPHENSON, SAMUEL**
*Provider ID: 284934*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1578058665*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**BARBA, DAVID**
*Provider ID: 244087*
*Board Certified 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*

**SURGERY NEUROLOGICAL**

**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*
*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**

**HATEFI, DUSTIN**
*Provider ID: 310033*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1790072106*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR*
*Medi-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
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437416591*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY NEUROLOGICAL**

**OSORIO, JOSEPH**
*Provider ID: 242007*
*Board Certified 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: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 9AM-4:30PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**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, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*Website: N/A*
*IPA: Imperial Health Holdings Medical Group-SD*

**SURGERY ORTHOPEDIC**

**BUI, CHRISTOPHER**
*Provider ID: 241162*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1619231537*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BUKATA, SUSAN**
*Provider ID: 304181*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932140639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**BUKATA, SUSAN**
*Provider ID: 277948*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1932140639*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHENG, YU-TSUN**
*Provider ID: 301903*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Male*
*NPI: 1992982854*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**CHIARAPPA, FRANK**
*Provider ID: 304174*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1932536828*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CHOI, JIHOON**
*Provider ID: 284788*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1285097741*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**CIDAMBI, EMILY**
*Provider ID: 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**

**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**

**EDMONDS, ERIC**
*Provider ID: 205495*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Male*
*NPI: 1013048412*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY ORTHOPEDIC**

**EDMONDS, ERIC**
*Provider ID: 260841*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
*Phone: (858) 966-6789*
*Fax: (858) 966-6706*
*After Hours Phone: (858) 966-6789*
*Provider Gender: Male*
*NPI: 1013048412*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**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*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311579*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*

*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083842371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**HURVITZ, ANDREW**
*Provider ID: 311580*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1083842371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**JACKSON, MADELEINE**
*Provider ID: 301818*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8800*
*After Hours Phone: (858) 966-8800*
*Provider Gender: Female*
*NPI: 1386140085*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: No*
*Min/Max Age: 0\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, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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: 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**

**SULLIVAN, THOMAS**
*Provider ID: 285247*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1437565488*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY ORTHOPEDIC**

**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 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 PEDIATRIC**

**BICKLER, STEPHEN**
*Provider ID: 270090*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1891866653*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KLING, KAREN**
*Provider ID: 283380*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**KLING, KAREN**
*Provider ID: 205340*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Female*
*NPI: 1982775144*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP*

*MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**LAZAR, DAVID**
*Provider ID: 283140*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1538365002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**LAZAR, DAVID**
*Provider ID: 205606*
*Board Certified Specialty: Yes*
*RADY CHILDRENS HEALTH NETWORK*
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1538365002*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network*

**SURGERY PEDIATRIC**

**THANGARAJAH, HARIHARAN**
*Provider ID: 256194*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1598979593*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**THOMPSON, KYLE**
*Provider ID: 310985*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
3030 CHILDRENS WAY STE 1
SAN DIEGO, CA 92123
*Phone: (858) 966-7711*
*Fax: (858) 966-7712*
*After Hours Phone: (858) 966-7711*
*Provider Gender: Male*
*NPI: 1598147050*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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 THORNTON*
*Medi-Cal Open 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: 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**

**KOLB, FREDERIC**
*Provider ID: 255575*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1790341832*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**KOLB, FREDERIC**
*Provider ID: 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**

**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**

**MASSENBURG, BENJAMIN**
*Provider ID: 311448*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1497280028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**
*Provider ID: 311376*
*Board Certified Specialty: No*
*RADY CHILDRENS HEALTH NETWORK*
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 966-5999*
*Fax: (858) 966-8394*
*After Hours Phone: (858) 966-5999*
*Provider Gender: Male*
*NPI: 1497280028*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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**

**MASSENBURG, BENJAMIN**

*Provider ID: 311447*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-8394*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**MASSENBURG, BENJAMIN**

*Provider ID: 311375*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-5999*

*Fax: (858) 966-8394*

*After Hours Phone: (858) 966-5999*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\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**

**MASSENBURG, BENJAMIN**

*Provider ID: 311449*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1497280028*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

**SURGERY PLASTIC**

**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*

## 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*

*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*

## SURGERY PLASTIC

**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*

## SURGERY THORACIC

**FOX, KENNETH**

*Provider ID: 257841*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

*Phone: (858) 966-8030*

*After Hours Phone: (858) 966-8030*

*Provider Gender: Male*

*NPI: 1235153552*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Rady Childrens Health Network*

## SURGERY THORACIC

**GANTA, SRUJAN**

*Provider ID: 256383*

*Board Certified 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*
*Medi-Cal Open Panel: Yes*
*Min/Max 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*

*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**

**ALBO, MICHAEL**
*Provider ID: 311548*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1912938499*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UCSD MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**CHEN, TONY**
*Provider ID: 283960*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1245684497*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**KADER, ANDREW**
*Provider ID: 311541*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Male*
*NPI: 1184731127*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 256847*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 311516*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*

*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MONGA, MANOJ**
*Provider ID: 274480*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1174609127*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**MOORE, SARAH**
*Provider ID: 311610*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
*Phone: (619) 297-4707*
*Fax: (858) 429-7927*
*After Hours Phone: (619) 297-4707*
*Provider Gender: Female*
*NPI: 1538620760*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**UROLOGY**

**PATEL, DEVIN**
*Provider ID: 246094*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (858) 657-7876*
*After Hours Phone: (858) 657-7876*
*Provider Gender: Male*
*NPI: 1437505559*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, CEDARS SINAI MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**UROLOGY**

**SANTIAGO-LASTRA, YAHIR**
*Provider ID: 311487*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
9333 GENESEE AVE STE 220

SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1699936609*
*Provider English Spoken: Y*
*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: 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: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**UROLOGY**

**UNTERBERG, STEPHEN**
*Provider ID: 284664*
*Board Certified 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: 295834*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: Male*
*NPI: 1215374210*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**UROLOGY**

**UNTERBERG, STEPHEN**

*Provider ID: 284665*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
*Phone: (858) 485-0554*
*Fax: (858) 429-7933*
*After Hours Phone: (858) 485-0554*
*Provider Gender: 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*

## SAN MARCOS

**CERTIFIED NURSE PRACTITIONER**

**BLAND, JACELIS**

*Provider ID: 296766*
*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: 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**

**CABRAL, 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) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1699222620*
*Provider English Spoken: Y*
*Provider Language(s)*

*Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**FODDA, RAMI**
*Provider ID: 296603*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1164660452*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, REGINA**
*Provider ID: 297837*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1639673858*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HAN, ANGELA**
*Provider ID: 300215*
*Board Certified 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: 1629242839*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
*Hospital Affiliation: JOHN MUIR MEDICAL CENTER WALNUT CREEK CAMPUS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KOHOUT, KATHRYN**
*Provider ID: 291105*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*

# D. Direktoryo ng Provider na Espesyalista

*NPI: 1316544331*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 14\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**MOONEY, PATRICIA**
*Provider ID: 280382*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
*Phone: (760) 747-8935*
*Fax: (760) 466-0078*
*After Hours Phone: (760) 747-8935*
*Provider Gender: Female*
*NPI: 1700470200*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**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**

**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) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1972090306*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**YCASAS, EMILY**
*Provider ID: 307853*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1033841861*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**BELANGER, TANYA**
*Provider ID: 290739*
*Board Certified 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: 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): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**JIMENEZ, CLARIBEL**
*Provider ID: 307941*
*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: 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*

**DERMATOLOGY**

**BROWN, REGINA**
*Provider ID: 309982*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
*Phone: (760) 738-7600*
*Fax: (760) 738-7616*
*After Hours Phone: (760) 738-7600*
*Provider Gender: Female*
*NPI: 1801424692*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERNAL MEDICINE**

**NGUYEN, MINH**
*Provider ID: 308467*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1154403640*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**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*
*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: 291583*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1679733760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-8PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**DO, HULBERT**
*Provider ID: 295941*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
*Phone: (760) 798-8855*
*Fax: (619) 616-2104*
*After Hours Phone: (760) 798-8855*
*Provider Gender: Male*
*NPI: 1679733760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**INTERVENTIONAL CARDIOLOGY**

**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**
*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: 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: 15\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: 291607*
*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: 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\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, Pashto, Persian, Urdu*
*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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-4:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**GUPTA, MONIKA**
*Provider ID: 307938*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Female*
*NPI: 1922243401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 16\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**HOSSEIN ZADEH MALEKI, ANA**
*Provider ID: 304998*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Female*
*NPI: 1316471485*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic, Persian*
*Cultural Competency: N*
*Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**MANDEVILLE, ROSS**
*Provider ID: 309933*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Male*
*NPI: 1205084183*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, MAYERS*

*MEMORIAL HOSP*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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-12:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**NEUROLOGY**

**SORIA LOPEZ, JOSE**
*Provider ID: 295745*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
*Phone: (760) 281-3662*
*Fax: (760) 316-5268*
*After Hours Phone: (760) 281-3662*
*Provider Gender: Male*
*NPI: 1225474034*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC*
*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**

**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) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1215469283*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\19*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRICS**

**LUM HO, RACHEL**
*Provider ID: 303150*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1215469283*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

**PEDIATRICS**

**POSADAS, EMERITO**
*Provider ID: 257536*
*Board Certified Specialty: No*
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 566-1501*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1720093198*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*
*Website: N/A*
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**PEDIATRICS**

**QUINTERO, CAROLYN**
*Provider ID: 303142*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1023033156*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Afar, Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**HERNANDEZ, MIRIAM**
*Provider ID: 298336*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1457903700*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**NAVARRETE CELESTINO, MISHEL**
*Provider ID: 302439*
*Board Certified 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: 1578263760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**POLLEY, SHANNON**
*Provider ID: 296093*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1225608722*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PHYSICIANS ASSISTANT**

**RUBIO, HALEY**
*Provider ID: 301290*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1598394371*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 2\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1073518965*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 5\50*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**FLYNN, DANIELLE**
*Provider ID: 290795*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1477785137*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\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 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Female*
*NPI: 1518996875*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**IMAM, SYED**
*Provider ID: 298174*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1447428271*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 15\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**TORRES, HECTOR**
*Provider ID: 290788*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Provider Gender: Male*
*NPI: 1720265614*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SAN YSIDRO

**FAMILY PRACTICE**

**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**

**BUTLER, KELLEY**
*Provider ID: 310820*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4050 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*

*Provider Gender: Female*
*NPI: 1316527286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**BUTLER, KELLEY**
*Provider ID: 310821*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1316527286*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**CHOU, SUSANNA**
*Provider ID: 310842*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1104889724*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**DALUGDUGAN, ESTHER**
*Provider ID: 302285*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1962662718*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**GOLU, CRISTIANA**
*Provider ID: 310232*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*

*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1083684997*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Romanian*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**MANSOUR, SABAH**
*Provider ID: 310230*
*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: 1194388637*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 13\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**NAVARRO, VANESSA MARIA**
*Provider ID: 297756*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1952563421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Filipino, Spanish, Tagalog*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**ORTEGA, LUIS**
*Provider ID: 295225*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Male*
*NPI: 1558924936*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**FAMILY PRACTICE**

**QURESHI, SOFIA**
*Provider ID: 308756*

# D. Direktoryo ng Provider na Espesyalista

*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: 1902197544*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## FAMILY PRACTICE GERIATRIC MEDICINE

**BULOW, KWI**
*Provider ID: 302346*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1073608576*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## 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*

## INFECTIOUS DISEASE

**RAMIREZ SANCHEZ, CLAUDIA**
*Provider ID: 296122*
*Board Certified Specialty: Yes*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1659720555*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*
*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*

# D. Direktoryo ng Provider na Espesyalista

**OBSTETRICS / GYNECOLOGY**

**ATIGA, SCHUBERT**

*Provider ID: 310885*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*Fax: (619) 662-4196*

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

*Provider Gender: Male*

*NPI: 1033138714*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

*Hospital Affiliation: SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OBSTETRICS / GYNECOLOGY**

**DINH, MY**

*Provider ID: 290490*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*Fax: (619) 205-6305*

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

*Provider Gender: Female*

*NPI: 1316146996*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 16\None*

*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) 662-4100*

*Provider Gender: Female*

*NPI: 1255878997*

*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-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) 205-6305*

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

*Provider Gender: Female*

*NPI: 1255878997*

*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-8PM SA 8AM-2PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**OBSTETRICS / GYNECOLOGY**

**KOBAYASHI, KAREN**

*Provider ID: 310881*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

4050 BEYER BLVD
SAN YSIDRO, CA 92173

*Phone: (619) 662-4100*

*Fax: (619) 205-6305*

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

*Provider Gender: Female*

*NPI: 1497929517*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**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) 205-6305*

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

*Provider Gender: Male*

*NPI: 1508209651*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Portuguese, Spanish*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: SU 10AM-4PM*
*M 8:30AM-8PM*
*W-F 8:30AM-5:30PM*
*SA 8AM-2:30PM*

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PEDIATRICS**

**TAYLOR, TASHA**

*Provider ID: 290077*

*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: 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):*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**PSYCHOLOGIST**

**IBANEZ, BERENICE**
*Provider ID: 290465*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1740394386*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 18\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**SHAUF, JOANN**
*Provider ID: 296045*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
3364 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1134732522*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**RHEUMATOLOGY**

**LWIN, THUTHIRI**
*Provider ID: 307650*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1174010896*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Burmese*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## SANTEE

**PEDIATRICS**

**IKE, ERICA**
*Provider ID: 309723*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*Fax: (619) 873-3476*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1821413907*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: ST JOHNS MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\18*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

### PSYCHOLOGIST

**ALVAREZ, ILIAN**
*Provider ID: 310379*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Provider Gender: Female*
*NPI: 1881842946*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 10\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## 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*
*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*

### 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*

**SURGERY GENERAL VASCULAR**

**HOWE, STEVEN**
*Provider ID: 206759*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
31700 TEMECULA VALLEY PARKWAY
TEMECULA, CA 92592
*Phone: (951) 303-2349*
*Fax: (951) 303-8591*
*After Hours Phone: (951) 303-2349*
*Provider Gender: Male*
*NPI: 1497702740*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**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: 306896*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619400801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CARDIOVASCULAR DISEASE**

**ABELHAD, NADIA**
*Provider ID: 306897*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619400801*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

## CARDIOVASCULAR DISEASE

**DO, HULBERT**
*Provider ID: 290574*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1679733760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
*Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 9AM-8PM*
*M-TH 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

## CERTIFIED ACUPUNCTURIST

**DUFFIELD, GARY**
*Provider ID: 310926*
*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: 1306428131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, 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

**DUFFIELD, GARY**
*Provider ID: 310925*
*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: 1306428131*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, 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

**SONG, CAROL**

# D. Direktoryo ng Provider na Espesyalista

*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: 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*
*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: 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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

**CERTIFIED NURSE PRACTITIONER**

**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*

**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*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# D. Direktoryo ng Provider na Espesyalista

*Hours: M-F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**CARDINELL, ANNA**
*Provider ID: 291411*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 270
VISTA, CA 92081
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1306978614*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal 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: 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*
*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: 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*

**CERTIFIED NURSE PRACTITIONER**

**CORY, ALLISON**
*Provider ID: 245207*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1194027706*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*TU 10:30AM-7:30PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HALGEDAHL, YI TING**
*Provider ID: 241907*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1619246907*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**CERTIFIED NURSE PRACTITIONER**

**HERNANDEZ, JESSICA**
*Provider ID: 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: 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*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max 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: 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*
*American Sign 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**

**HUERTA, STEVEN**
*Provider ID: 311299*
*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: 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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**
*Provider ID: 311297*
*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: 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: Community Care IPA LLC,*

*IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**HUERTA, STEVEN**

*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: 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: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**

*Provider ID: 298085*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*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*

*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: 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*
*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: 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*
*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**

**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 JR, KEITH**
*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*
*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 JR, KEITH**
*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**

**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*

# D. Direktoryo ng Provider na Espesyalista

*IPA: UCSD Medical Group*

**CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**

*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-5PM*
*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-5PM*
*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**

**YCASAS, EMILY**

*Provider ID: 298837*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1033841861*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8AM-8PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GUIDI, CASEY**
*Provider ID: 303315*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013349919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CERTIFIED REGISTERED NURSE MIDWIFE**

**GUIDI, CASEY**
*Provider ID: 300224*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1013349919*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 12\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-8PM*
*F 8AM-5PM*
*SA 9AM-4PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**CORTEZ, JAIME**
*Provider ID: 290483*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1508195348*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**CHIROPRACTOR**

**JU, NATHANIEL**
*Provider ID: 290220*
*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*

# D. Direktoryo ng Provider na Espesyalista

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

## 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*

## HOSPICE AND PALLIATIVE MEDICINE

**RUBENZIK, TAMARA**
*Provider ID: 282128*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102
VISTA, CA 92081
*Phone: (619) 543-6397*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-6397*
*Provider Gender: Female*
*NPI: 1811200652*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

## 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) 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**

**COPELAND, ARDETH**
*Provider ID: 310696*
*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: 1699704338*
*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*

**INTERNAL MEDICINE**

**COPELAND, ARDETH**
*Provider ID: 310697*
*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: 1699704338*
*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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*IPA: 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, Persian*

*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, Persian*

*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: 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: 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, Persian*

*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*
*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

**HAWKINS, MELISSA**
*Provider ID: 290596*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Female*
*NPI: 1851620447*
*Provider English Spoken: Y*
*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 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) 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: 18\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: 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*
*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 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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: 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**

**KIM, MICHAEL**
*Provider ID: 290697*
*Board Certified Specialty: No*
*IHP OF SOUTHERN CAL-PHP*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Provider Gender: Male*
*NPI: 1164546313*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-W 8AM-5PM*
*TH 10:30AM-7:30PM*
*F 8AM-5PM*
*Website: N/A*
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

**OPTOMETRIST**

**KIM, MICHAEL**
*Provider ID: 245239*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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
*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 9AM-8PM*
*F 9AM-5PM*
*SA 9AM-4PM*
*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 9AM-8PM*
*F 9AM-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**

**TAM, EMILY**
*Provider ID: 290316*
*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: 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**

**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*

# D. Direktoryo ng Provider na Espesyalista

**PEDIATRICS**

**RAHIMI, NASSRIN**

*Provider ID: 257581*

*Board Certified Specialty: No*

*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1063438166*

*Provider English Spoken: Y*

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

*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\18*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*

**PHYSICIANS ASSISTANT**

**WALLACE, STEPHANIE**

*Provider ID: 239770*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (888) 216-8482*

*Provider Gender: Female*

*NPI: 1518104942*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: PALOMAR MEDICAL CENTER*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: Community Care IPA LLC*

**PODIATRIST**

**MILLER, JULIE**

*Provider ID: 290666*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

1000 VALE TERRACE DR
VISTA, CA 92084

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1619115664*

*Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

*Website: N/A*

*IPA: IHP of Southern Cal-PHP*

**PODIATRIST**

**MILLER, JULIE**

*Provider ID: 305464*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

134 GRAPEVINE RD
VISTA, CA 92083

*Phone: (760) 631-5000*

*Fax: (760) 414-3892*

*After Hours Phone: (760) 631-5000*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Provider Gender: Female*
*NPI: 1619115664*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*IPA: IHP of Southern Cal-PHP*

**REGISTERED PHYSICAL THERAPIST**

**AMBROSE, CHRISTOPHER**
*Provider ID: 248009*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2067 W VISTA WAY STE 185
VISTA, CA 92083
*Phone: (760) 631-5888*
*Fax: (760) 631-5880*
*After Hours Phone: (760) 591-7750*
*Provider Gender: Male*
*NPI: 1114977535*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 8\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7PM*
*TU 7AM-5PM*
*W 7AM-7PM*
*TH 7AM-5PM*
*F 7AM-7PM*
*Website: N/A*
*IPA: Community Care IPA LLC*

**SURGERY GENERAL**

**ARMANI, AVA**
*Provider ID: 282144*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
910 SYCAMORE AVE STE 102
VISTA, CA 92081
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Provider Gender: Female*
*NPI: 1861759383*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Hospital Affiliation: UCSF MEDICAL CENTER, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*
*Medi-Cal Open Panel: Yes*
*Min/Max Age: 0\None*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*Website: N/A*
*IPA: UCSD Medical Group*

**SURGERY GENERAL**

**GROVE, JAY**
*Provider ID: 245227*
*Board Certified Specialty: No*
*COMMUNITY CARE IPA LLC*
2385 S MELROSE DR
VISTA, CA 92081
*Phone: (760) 300-3647*
*Fax: (760) 482-1316*
*After Hours Phone: (760) 300-3647*
*Provider Gender: Male*
*NPI: 1912971334*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
*Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS 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*
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**

**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*
*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*

**PULMONARY DISEASES**

**KUMAR, AVNEE**
*Provider ID: 300013*
*Board Certified Specialty: No*
*UCSD MEDICAL GROUP*
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
*Phone: (951) 677-1111*
*Fax: (951) 677-9757*
*After Hours Phone: (951) 677-1111*
*Provider Gender: Female*
*NPI: 1750745394*
*Provider English Spoken: Y*
*Cultural Competency: N*
*Medi-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

# D. Direktoryo ng Provider na Espesyalista

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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# E. Direktoryo ng Ospital - Pangkalahatang Ospital para sa Pangangalaga ng Malubhang Kondisyon

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

**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*
*Website: www.palomarhealth.org/facilities/palomar-medical- center*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**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*

# E. Direktoryo ng Ospital - Pangkalahatang Ospital para sa Pangangalaga ng Malubhang Kondisyon

*days/week*
*NPI: 1356410351*
*Website: www.paradisevalleyhospital.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*
*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*
*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: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000050*
*NPI: 1841277704*
*Website: www.scripps.org/locations/hospitals__scripps- memorial- hospital- la- jolla*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SCRIPPS MEMORIAL HOSPITAL ENCINITAS**

*Provider ID: 170305*
354 SANTA FE DR
ENCINITAS, CA 92024
*Phone: (760) 753-6501*
*After Hours Phone: (760) 753-6501*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000148*
*NPI: 1700829199*
*Website: www.scripps.org/locations/hospitals__scripps- memorial- hospital- encinitas*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

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# E. Direktoryo ng Ospital - Pangkalahatang Ospital para sa Pangangalaga ng Malubhang Kondisyon

**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/locations/hospitals__scripps- mercy- hospital__scripps - mercy- hospital- san- diego*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing 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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SELECT SPECIALTY HOSPITAL SAN DIEGO**
*Provider ID: 170165*
555 WASHINGTON ST
SAN DIEGO, CA 92103
*Phone: (619) 260-8300*
*After Hours Phone: (619) 260-8300*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 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*
*Hours: 24 Hours / 7 days/week*
*License Number: 090000008*
*NPI: 1396728630*
*Website: www.sharp.com/hospitals/chula- vista/*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SHARP CORONADO HOSP AND HEALTHCARE CTR**
*Provider ID: 170252*
250 PROSPECT PL
CORONADO, CA 92118
*Phone: (619) 522-3600*
*After Hours Phone: (619) 522-3600*
*Accepting New Patients: No*

# E. Direktoryo ng Ospital - Pangkalahatang Ospital para sa Pangangalaga ng Malubhang Kondisyon

*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1154304475*
*Website: www.sharp.com/hospitals/coronado/*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS**
*Provider ID: 170054*
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
*Phone: (858) 939-3400*
*After Hours Phone: (858) 939-3400*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 080000039*
*NPI: 1407839921*
*Website: www.sharp.com*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**SHARP MEMORIAL HOSPITAL**
*Provider ID: 170047*
7901 FROST ST
SAN DIEGO, CA 92123
*Phone: (858) 939-3400*
*After Hours Phone: (858) 939-3400*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*NPI: 1407839921*
*Website: www.sharp.com/hospitals/memorial/*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**TRI CITY MEDICAL CTR**
*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*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Birthing Friendly: Y*

**UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER**
*Provider ID: 685221*
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (619) 287-3270*
*After Hours Phone: (619) 287-3270*
*Accepting New Patients: No*
*Min/Max Age: 0\None*
*Site English Spoken: Y*
*Cultural Competency: N*
*Hospital Accreditation Status: JCAHO*
*Hours: 24 Hours / 7 days/week*
*License Number: 090000101*
*NPI: 1184722779*
*Website: N/A*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

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# E. Direktoryo ng Ospital - Pangkalahatang Ospital para sa Pangangalaga ng Malubhang Kondisyon

**UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER**

*Provider ID: 685221*

6655 ALVARADO RD
SAN DIEGO, CA 92120

*Phone: (619) 287-3270*

*After Hours Phone: (619) 287-3270*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000013*

*NPI: 1184722779*

*Website: N/A*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**UCSD LA JOLLA JOHN SALLY THORNTON**

*Provider ID: 170053*

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (858) 657-7000*

*After Hours Phone: (858) 657-7000*

*Accepting New Patients: No*

*Min/Max Age: 0\None*

*Site English Spoken: Y*

*Cultural Competency: N*

*Hospital Accreditation Status: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1497021265*

*Website: N/A*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

**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: JCAHO*

*Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1184722779*

*Website: https://health.ucsd.edu/locations/pages/hillcrest.aspx*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

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# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

## 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*

*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*

*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.avocadopostacute.com*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*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.com*

*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*

*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://somersetsubacute.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*

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*

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*

*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*
*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 DORTHY AND JOSEPH GOLGBERG 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*

## 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*

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

**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*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

## 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*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

**VIA RIO HOUSE**
*Provider ID: 662930*
1262 VIA ENCINOS DR
FALLBROOK, CA 92028
*Phone: (760) 731-2157*
*Fax: (760) 721-9872*
*After Hours Phone: (760) 731-2157*
*Accepting New Patients: No*
*NPI: 1962488007*
*Website: 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*
*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/*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog, Spanish, Russian*
*Cultural Competency: N*
*American Sign Language (ASL): 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*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

**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*

*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*

*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 CENTER**

*Provider ID: 172022*

3780 MASSACHUSETTS AVE
LA MESA, CA 91941

*Phone: (619) 465-1313*

*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**

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

*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*

*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*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

### 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/*

*Credentials and/or certifications:*

*Site English Spoken: Y*

*Cultural Competency: N*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

**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*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## OCEANSIDE

**ANDRU HOME**
*Provider ID: 664438*
311 DEL FLORA ST
OCEANSIDE, CA 92058
*Phone: (760) 439-1741*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 439-1741*
*Accepting New Patients: No*
*Hours: M-F 9AM-5PM*
*NPI: 1801981667*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BRADY HOME**
*Provider ID: 664440*
4825 GLENHAVEN DR
OCEANSIDE, CA 92056
*Phone: (760) 295-4505*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 295-4505*
*Accepting New Patients: No*
*Hours: M-F 9AM-5PM*
*NPI: 1760725766*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LA PALOMA HEALTHCARE CENTER**
*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*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Site Languages(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

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

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**
*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://bouldercreekpa.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*
*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.palomarhealth.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*

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

*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
*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*

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

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*

**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*
*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*
*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*

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Fax: (858) 672-9247*
*After Hours Phone: (858) 672-3900*
*Accepting New Patients: No*
*NPI: 1518063437*
*Website: 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*
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://windsorgoldenhill.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/*
*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**

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

*Provider ID: 417094*
9009 CAMPO RD
SPRING VALLEY, CA 91977
*Phone: (619) 460-2711*
*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 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: covlivingmountmiguel.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*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## VALLEY CENTER

**AMREEN HOME**
*Provider ID: 658588*
13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082
*Phone: (760) 751-9879*
*Fax: (760) 749-3019*
*After Hours Phone: (760) 751-9879*
*Accepting New Patients: No*
*NPI: 1700160405*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## VISTA

**AMBER HOME**
*Provider ID: 664436*
305 CARLSON CT
VISTA, CA 92083
*Phone: (760) 631-1527*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 631-1527*
*Accepting New Patients: No*
*Hours: M-F 9AM-5PM*
*NPI: 1497924823*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ANZA HOUSE**
*Provider ID: 662920*
1736 ANZA AVE
VISTA, CA 92084
*Phone: (760) 721-1706*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# F. Pangmatagalang pangangalaga (Long-Term Care, LTC) at Mga Skilled Nursing Facility (Skilled Nursing Facilities,

*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*

**HAYDEN HOME**
*Provider ID: 664442*
822 GRANADA DR
VISTA, CA 92083
*Phone: (760) 941-8052*
*Fax: (949) 218-1670*
*After Hours Phone: (760) 941-8052*
*Accepting New Patients: No*
*NPI: 1245400670*
*Website: N/A*
*Credentials and/or certifications:*
*Site English Spoken: Y*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LA FUENTE POST ACUTE**
*Provider ID: 429590*
247 E BOBIER DR
VISTA, CA 92084
*Phone: (760) 945-3033*
*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*
*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*

*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 Languages(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 Languages(s) Spoken: Korean, Tagalog, Vietnamese, Spanish*
*Cultural Competency: N*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# G. Mga Serbisyo sa Komunidad para sa Nasa Hustong Gulang (Community-Based Adult Services, CBAS) - Mga

## 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): 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://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

*Facility has access to skilled*

*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*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Hours: M-F 8AM-4:30PM*
*License Number: 060000582*
*NPI: 1396476388*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*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

**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

# G. Mga Serbisyo sa Komunidad para sa Nasa Hustong Gulang (Community-Based Adult Services, CBAS) - Mga

*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Website: www.casa- pacifica.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.lovingcareadhc.com*

**SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE**
*Provider ID: 539018*
4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
*Phone: (858) 244-4555*
*Fax: (858) 724-3302*
*After Hours Phone: (858) 244-4555*
*Accepting New Patients: No*
*Site Languages(s) Spoken: Vietnamese, Mandarin, Spanish*
*Hours: M-F 8AM-5PM*
*License Number: 550005837*
*NPI: 1396201828*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: Y*
*If Facility has completed cultural competence training:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: Y*
*Website: Sandiegofamilycircle.com*

## SAN MARCOS

**AMERICARE ADULT DAY HEALTH CARE CENTER**
*Provider ID: 420060*
340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069
*Phone: (760) 682-2424*
*Fax: (760) 471-5104*
*After Hours Phone: (760) 682-2424*
*Accepting New Patients: No*
*License Number: 060000832*
*NPI: 1528271186*
*Accessibility: CONTACT PROVIDER*
*American Sign Language (ASL): N*
*Language line interpreter services: N*
*If Facility has completed cultural competence training:* N
*Facility has access to skilled medical interpreters on site?: N*
*Interpreter Non-English Languages: N*
*Website: www.americareadhc.com*

# H. Mga Pansuportang Serbisyo sa Tahanan ng County (IHSS)

**SAN DIEGO**

**AGING & INDEPENDENCE SERVICES**

*Specialty: Case Management*

5560 OVERLAND AVE
SAN DIEGO, CA 92123

*Phone: (858) 495-5885*

*License Number: 1710308986*

*Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:00AM-5:00PM*

*Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html*

# I. Direktoryo ng Kalusugan ng Isip

## ALPINE

**KHALEEL, AMMAR**
*Provider Gender: Male*
*License Number: LCS110302*
*NPI: 1841744208*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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*
*Provider Language(s) Spoken: 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*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## CHULA VISTA

**BAYLON, ALDO**
*Provider Gender: Male*
*License Number: PSY29904*
*NPI: 1649429150*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ALDO BAYLON
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 14\None*
*Gender Restriction: No Gender*

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

**CASTLEBERRY, DANI**
*Provider Gender: Female*
*License Number: LCS95022*
*NPI: 1053706853*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
DANI E CASTLEBERRY
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 240-7825*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CELAYA, PATRICIA**
*Provider Gender: Female*
*License Number: PSY33233*
*NPI: 1952656902*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
PATRICIA E CELAYA
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**JUAREZ, AMERICA**
*Provider Gender: Female*
*License Number: LCS92516*
*NPI: 1386281541*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMERICA P JUAREZ
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KURZ, TROY**
*Provider Gender: Male*
*License Number: A157190*
*NPI: 1154862357*
*Provider English Spoken: Y*
*Cultural Competency: N*
TROY L KURZ
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-6941*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*

**MALAK, LAWRENCE**
*Provider Gender: Male*
*License Number: A115345*
*NPI: 1467773028*
*Provider English Spoken: Y*
*Cultural Competency: N*
LAWRENCE T MALAK
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM*

**SHIELDS, SEBASTIAN**
*Provider Gender: Male*
*License Number: MFC124495*
*NPI: 1558895342*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SEBASTIAN L SHIELDS
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**TROYER, EMILY**
*Provider Gender: Female*
*License Number: A149101*
*NPI: 1326484437*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A TROYER
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 425-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM SA 8AM-4PM*

**WIJAYARATNE, IMANIE**
*Provider Gender: Female*
*License Number: PSY25044*
*NPI: 1932358355*
*Provider English Spoken: Y*
*Cultural Competency: N*
IMANIE S WIJAYARATNE
678 3RD AVE
CHULA VISTA, CA 91910
*Phone: (619) 662-4100*
*Fax: (619) 245-1184*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## EL CAJON

**ARAIZA, ERNESTINA**
*Provider Gender: Female*
*License Number: PSY32549*
*NPI: 1568608636*
*Provider English Spoken: Y*
*Cultural Competency: N*
ERNESTINA ARAIZA
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 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*

**CASEY, SHANNON**
*Provider Gender: Female*
*License Number: PSY31889*
*NPI: 1548873755*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Sign Language*
*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*
*Provider Language(s) Spoken: Sign Language*
*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
GUADALUPE A CRUZ
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GARNER, SARAH**
*Provider Gender: Female*
*License Number: LCS106507*
*NPI: 1124476809*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SARAH J GARNER
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Mandarin, Arabic,*

*Japanese, Farsi, Italian, 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*

**LUCEY, MEGHAN**
*Provider Gender: Female*
*License Number: LCS122372*
*NPI: 1265105415*
*Provider English Spoken: Y*
*Cultural Competency: N*
MEGHAN F LUCEY
855 E MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 440-2751*
*Fax: (360) 462-2746*
*After Hours Phone: (619) 440-2751*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Italian, Chinese, Farsi, Mandarin, Arabic, Japanese*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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) 667-6125*
*Fax: (619) 590-9036*
*After Hours Phone: (619) 667-6125*
*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*

**MAXWELL-JUNGE, MELISSA**
*Provider Gender: Female*
*License Number: LCS90791*
*NPI: 1275182826*
*Provider English Spoken: Y*
*Cultural Competency: N*
MELISSA K MAXWELL-JUNGE
215 W MADISON AVE
EL CAJON, CA 92020
*Phone: (619) 667-6125*
*Fax: (619) 590-9036*
*After Hours Phone: (619) 667-6125*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SADDA, REEM**
*Provider Gender: Female*
*License Number: A163129*
*NPI: 1871921833*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
REEM J SADDA
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**WEAVER, AMANDA**
*Provider Gender: Female*
*License Number: MFC105361*
*NPI: 1174266423*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMANDA R WEAVER
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WHEELER, KIM**
*Provider Gender: Female*
*License Number: PSY34237*
*NPI: 1700577434*
*Provider English Spoken: Y*
*Cultural Competency: N*
KIM N WHEELER
875 EL CAJON BLVD
EL CAJON, CA 92020
*Phone: (619) 662-4100*
*Fax: (619) 785-3356*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 11\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## ENCINITAS

**GARCIA, ROSEMARIE**
*Provider Gender: Female*
*License Number: MFC123590*
*NPI: 1710410980*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROSEMARIE C GARCIA
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GOMEZ, JUANITA**
*Provider Gender: Female*
*License Number: PSY27439*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JUANITA GOMEZ
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LOPEZ, JOANNA**
*Provider Gender: Female*
*License Number: MFC50381*
*NPI: 1275664385*
*Provider English Spoken: Y*
*Cultural Competency: N*
JOANNA M LOPEZ
1130 2ND ST
ENCINITAS, CA 92024
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## ESCONDIDO

**ARLINGHAUS, RENE**
*Provider Gender: Female*
*License Number: LCS80909*
*NPI: 1568973964*
*Provider English Spoken: Y*
*Cultural Competency: N*
RENE M ARLINGHAUS
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BECERRA, GABRIEL**
*Provider Gender: Male*
*License Number: LCS114743*
*NPI: 1205313319*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
GABRIEL CELESTINO BECERRA
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 7AM-7:30PM*
*TU 7AM-4:30PM*
*W 7AM-7:30PM*
*TH-F 7AM-4:30PM*

**BECKMAN, KARI**
*Provider Gender: Female*
*License Number: LCS121629*
*NPI: 1861243271*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
KARI L BECKMAN
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760)*

# I. Direktoryo ng Kalusugan ng Isip

*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*

**CASTRO, LIZA**
*Provider Gender: Female*
*License Number: MFC145076*
*NPI: 1720572654*
*Provider English Spoken: Y*
*Cultural Competency: N*
LIZA M CASTRO
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*

**FU, KATHERINE**
*Provider Gender: Female*
*License Number: A187562*
*NPI: 1356877807*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE FU
704 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**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) 741-2642*
*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*

**KAHLY, BROOKE**
*Provider Gender: Female*
*License Number: LCS84367*
*NPI: 1649833120*
*Provider English Spoken: Y*
*Cultural Competency: N*
BROOKE N KAHLY
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*
*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*

**MARTINEZ, NORAYMA**
*Provider Gender: Female*
*License Number: LCS100019*
*NPI: 1669808267*
*Provider English Spoken: Y*
*Cultural Competency: N*
NORAYMA MARTINEZ
728 E VALLEY PKWY
ESCONDIDO, CA 92025
*Phone: (760) 737-6900*
*Fax: (360) 462-2748*
*After Hours Phone: (760) 737-6900*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

*Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MCGHEE, JULEA**
*Provider Gender: Female*
*License Number: A95593*
*NPI: 1417016304*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JULEA L MCGHEE
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MCGINLEY, NANCY**
*Provider Gender: Female*
*License Number: A167231*
*NPI: 1649765124*
*Provider English Spoken: Y*
*Cultural Competency: N*
NANCY R MCGINLEY
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*

**PENT, MICHELLE**
*Provider Gender: Female*
*License Number: C55145*
*NPI: 1275627655*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE P PENT
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PRASAD, AMITHA**
*Provider Gender: Female*
*License Number: A158657*
*NPI: 1821436882*
*Provider English Spoken: Y*
*Cultural Competency: N*
AMITHA, PRASAD
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 294-9270*
*Fax: (760) 294-9268*
*After Hours Phone: (760) 294-9270*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIOS, SIERRA**
*Provider Gender: Female*
*License Number: LCS91970*
*NPI: 1942746128*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SIERRA K RIOS
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8340*
*Fax: (360) 462-2752*
*After Hours Phone: (760) 520-8340*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIVERA, MELISSA**
*Provider Gender: Female*
*License Number: MFC131285*
*NPI: 1184171720*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MELISSA N RIVERA
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**STONE, CALVIN**
*Provider Gender: Male*
*License Number: 20A18127*
*NPI: 1275995870*
*Provider English Spoken: Y*
*Cultural Competency: N*
CALVIN T STONE
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*

**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*

**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*

**VAQUERO, JUANA**
*Provider Gender: Female*
*License Number: PSY28364*
*NPI: 1023459708*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*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*

**VENNAM, VAMSIKRISHNA**
*Provider Gender: Male*
*License Number: 20A19415*
*NPI: 1679070569*
*Provider English Spoken: Y*
*Cultural Competency: N*
VAMSIKRISHNA 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*

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

**VERCHER, ROSHON**
*Provider Gender: Male*
*License Number: LCS101363*
*NPI: 1316611288*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROSHON VERCHER
425 N DATE ST
ESCONDIDO, CA 92025
*Phone: (760) 520-8300*
*Fax: (858) 633-4698*
*After Hours Phone: (760) 520-8300*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FALLBROOK**

**GILROY, LAURA**
*Provider Gender: Female*
*License Number: LCS27123*
*NPI: 1437427978*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
LAURA L GILROY
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 7\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MAGEE, ANNA**
*Provider Gender: Female*
*License Number: LCS107407*
*NPI: 1194234609*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANNA M MAGEE
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MCAULEY, ROBERT**
*Provider Gender: Male*
*License Number: G23317*
*NPI: 1194881888*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROBERT A MCAULEY
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4730*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4730*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*

**MILES, RENEE**
*Provider Gender: Female*
*License Number: LCS70204*
*NPI: 1053763623*
*Provider English Spoken: Y*
*Cultural Competency: N*
RENEE S MILES
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WAGONER, KENYADA**
*Provider Gender: Female*
*License Number: LCS114731*
*NPI: 1760172688*
*Provider English Spoken: Y*
*Cultural Competency: N*
KENYADA M WAGONER
1328 S MISSION RD
FALLBROOK, CA 92028
*Phone: (760) 451-4720*
*Fax: (760) 457-4700*
*After Hours Phone: (760) 451-4720*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 11\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## LA JOLLA

**BOOTH, CHRISTOPHER**
*Provider Gender: Male*
*License Number: PSY26073*
*NPI: 1568893162*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTOPHER R BOOTH
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BOOTH, CHRISTOPHER**
*Provider Gender: Male*
*License Number: PSY26073*
*NPI: 1568893162*
*Provider English Spoken: Y*
*Cultural Competency: N*
CHRISTOPHER R BOOTH
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*

**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*

**CHESHER, NICHOLAS**
*Provider Gender: Male*
*License Number: PSY29290*
*NPI: 1124539697*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICHOLAS J CHESHER
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CRANDAL, BRENT**
*Provider Gender: Male*
*License Number: PSY26294*
*NPI: 1588739452*
*Provider English Spoken: Y*
*Cultural Competency: N*
BRENT R CRANDAL
8950 VILLA LA JOLLA DR

STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DUARTE, KRISTEN**
*Provider Gender: Female*
*License Number: PSY31227*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN L DUARTE
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**DUARTE, KRISTEN**
*Provider Gender: Female*
*License Number: PSY31227*
*NPI: 1093119364*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN L DUARTE
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**EGAN, KAITLYN**
*Provider Gender: Female*
*License Number: PSY32214*
*NPI: 1629653860*
*Provider English Spoken: Y*
*Cultural Competency: N*
KAITLYN N EGAN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*
*Website: N/A*
*Accepting New Patients: Yes*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Site English 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*

**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*

**ELLEDGE, LINDSAY**
*Provider Gender: Female*
*License Number: LCS96136*
*NPI: 1619428828*
*Provider English Spoken: Y*
*Cultural Competency: N*
LINDSAY E ELLEDGE
8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FINN, DAPHNA**
*Provider Gender: Female*
*License Number: A152291*
*NPI: 1639522725*
*Provider English Spoken: Y*
*Cultural Competency: N*
DAPHNA M FINN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

*N*

*Accessibility: CONTACT PROVIDER*

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

**KHAFAJA, MOHAMAD**

*Provider Gender: Male*

*License Number: A115892*

*NPI: 1780867119*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: N*

MOHAMAD H KHAFAJA

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**LASSWELL, EVE**

*Provider Gender: Female*

*License Number: PSY30220*

*NPI: 1013483635*

*Provider English Spoken: Y*

*Cultural Competency: N*

EVE N LASSWELL

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**LEDBETTER, ALEX**

*Provider Gender: Male*

*License Number: 20A20454*

*NPI: 1073017315*

*Provider English Spoken: Y*

*Cultural Competency: N*

ALEX W LEDBETTER

8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**LEE, DAVID**

*Provider Gender: Male*

*License Number: A124329*

*NPI: 1871884130*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Korean*

*Cultural Competency: N*

DAVID J LEE

9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*After Hours Phone: (800) 926-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT*

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

**LI, XIA**
*Provider Gender: Female*
*License Number: A163344*
*NPI: 1336670413*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
XIA LI
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MAXWELL, BENJAMIN**
*Provider Gender: Male*
*License Number: A108124*
*NPI: 1740415926*
*Provider English Spoken: Y*
*Cultural Competency: N*
BENJAMIN K MAXWELL
8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (858) 534-8019*
*Fax: (858) 534-6727*
*After Hours Phone: (858) 534-8019*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**MENDEZ, ANDRES**
*Provider Gender: Male*
*License Number: PSY28907*
*NPI: 1841482692*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ANDRES G MENDEZ
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# I. Direktoryo ng Kalusugan ng Isip

*N*

*Accessibility: CONTACT PROVIDER*

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

**MITCHELL, NORA**

*Provider Gender: Female*

*License Number: LCS88855*

*NPI: 1245607043*

*Provider English Spoken: Y*

*Cultural Competency: N*

NORA K MITCHELL

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**MOORE, SHAVON**

*Provider Gender: Female*

*License Number: A152789*

*NPI: 1053682773*

*Provider English Spoken: Y*

*Cultural Competency: N*

SHAVON C MOORE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (800) 826-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 826-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**MOORE, SHAVON**

*Provider Gender: Female*

*License Number: A152789*

*NPI: 1053682773*

*Provider English Spoken: Y*

*Cultural Competency: N*

SHAVON C MOORE

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

*Phone: (800) 926-8273*

*Fax: (888) 539-8781*

*After Hours Phone: (800) 926-8273*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

**NGUYEN, HOANG**

*Provider Gender: Male*

*License Number: G83977*

*NPI: 1720011620*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: N*

HOANG A NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

*Phone: (619) 497-6673*

*After Hours Phone: (619) 497-6673*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

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

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# I. Direktoryo ng Kalusugan ng Isip

**NGUYEN, JULIA**
*Provider Gender: Female*
*License Number: A193351*
*NPI: 1881155232*
*Provider English Spoken: Y*
*Cultural Competency: N*
JULIA K NGUYEN
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NGUYEN, HOANG**
*Provider Gender: Male*
*License Number: G83977*
*NPI: 1720011620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**PELHAM, WILLIAM**
*Provider Gender: Male*
*License Number: PSY33091*
*NPI: 1306629399*
*Provider English Spoken: Y*
*Cultural Competency: N*
WILLIAM E PELHAM
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**QAYOUMI, WALI**
*Provider Gender: Male*
*License Number: A168429*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
WALI Z QAYOUMI
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
*Phone: (858) 822-5881*
*Fax: (888) 539-8781*
*After Hours Phone: (858) 822-5881*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**QAYOUMI, WALI**
*Provider Gender: Male*

# I. Direktoryo ng Kalusugan ng Isip

*License Number: A168429*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
WALI Z QAYOUMI
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
*Phone: (619) 284-3746*
*Fax: (888) 579-8781*
*After Hours Phone: (619) 284-3746*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*
*TDD: 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

# I. Direktoryo ng Kalusugan ng Isip

9300 MEDIAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SCHNEEBERGER, ANDRES**
*Provider Gender: Male*
*License Number: C175502*
*NPI: 1184867376*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANDRES R SCHNEEBERGER
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**THOMAS, KELSEY**
*Provider Gender: Female*
*License Number: PSY29738*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
KELSEY R THOMAS
8950 VILLA LA JOLLA DR STE 101
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**THOMAS, KELSEY**
*Provider Gender: Female*
*License Number: PSY29738*
*NPI: 1700264264*
*Provider English Spoken: Y*
*Cultural Competency: N*
KELSEY R THOMAS
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**WISHNEK, HANNAH**
*Provider Gender: Female*
*License Number: LCS105699*
*NPI: 1578012043*
*Provider English Spoken: Y*
*Cultural Competency: N*
HANNAH K WISHNEK
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ZLATAR, ZVINKA**
*Provider Gender: Female*
*License Number: PSY26230*
*NPI: 1497139059*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ZVINKA Z ZLATAR
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

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

**NATIONAL CITY**

**CHOI, MIN**
*Provider Gender: Female*
*License Number: MFC135952*
*NPI: 1871195107*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIN H CHOI
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**CHOI, MIN**
*Provider Gender: Female*
*License Number: MFC135952*
*NPI: 1871195107*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIN H CHOI
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 356-2726*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**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*
*NPI: 1497813968*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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*

**SIMMONS, ROBERT**
*Provider Gender: Male*
*License Number: LCS117787*
*NPI: 1689269631*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROBERT M SIMMONS
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-9853*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

*PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

**SIMMONS, ROBERT**
*Provider Gender: Male*
*License Number: LCS117787*
*NPI: 1689269631*
*Provider English Spoken: Y*
*Cultural Competency: N*
ROBERT M SIMMONS
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (844) 200-2426*
*Fax: (619) 434-9853*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TH 8AM-6PM F 8AM-5PM*

## OCEANSIDE

**BARUCH, VANIA**
*Provider Gender: Female*
*License Number: LCS102454*
*NPI: 1205469053*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANIA M BARUCH
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 8AM-7PM W 8AM-6:30PM TH 8:30AM-7PM F 8:30AM-12PM*

**BARUCH, VANIA**
*Provider Gender: Female*
*License Number: LCS102454*
*NPI: 1205469053*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANIA M BARUCH
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 8AM-7PM W 8AM-6:30PM TH 8:30AM-7PM F 8:30AM-12PM*

**BARUCH, VANIA**
*Provider Gender: Female*
*License Number: LCS102454*
*NPI: 1205469053*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANIA M BARUCH
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 8AM-7PM*
*W 8AM-6:30PM*
*TH 8:30AM-7PM*
*F 8:30AM-12PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
818 PIER VIEW WAY
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Chinese, Farsi*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**CHALMERS, VIRGINIA**
*Provider Gender: Female*
*License Number: LCS28053*
*NPI: 1265613715*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
VIRGINIA C CHALMERS
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*

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*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*

**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: 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*

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*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
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*

**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*

**JENSEN, BRIAN**

*Provider Gender: Male*
*License Number: PSY26041*
*NPI: 1518138049*
*Provider English Spoken: Y*
*Cultural Competency: N*
BRIAN M JENSEN
619 CROUCH ST
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRAPES, MICHAEL**

*Provider Gender: Male*
*License Number: PSY25077*
*NPI: 1215233028*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHAEL B KRAPES
2210 MESA DR STE 300
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MONTEZ, REBECCA**
*Provider Gender: Female*
*License Number: LCS26869*
*NPI: 1396047809*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
REBECCA MONTEZ
2210 MESA DR STE 5
OCEANSIDE, CA 92054
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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
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

# I. Direktoryo ng Kalusugan ng Isip

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*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
517 N HORNE ST
OCEANSIDE, CA 92054
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**SLOAN, CRISTINA**
*Provider Gender: Female*
*License Number: MFC137279*
*NPI: 1912456377*
*Provider English Spoken: Y*
*Cultural Competency: N*
CRISTINA I SLOAN
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: 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
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: 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
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: 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
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: 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
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 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
4700 N RIVER RD
OCEANSIDE, CA 92057
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 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*
*Provider Language(s) Spoken: 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*

**SMITH, SONYA**
*Provider Gender: Female*
*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*

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*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*
*Provider Language(s) Spoken: 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*
*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*

**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*

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*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**POWAY**

**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*

**MCGINLEY, NANCY**
*Provider Gender: Female*
*License Number: A167231*
*NPI: 1649765124*
*Provider English Spoken: Y*
*Cultural Competency: N*
NANCY R MCGINLEY
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*
*Provider Language(s) Spoken: German, Gujarati*
*Cultural Competency: N*
MAMTA D MODHWADIA
13010 POWAY RD
POWAY, CA 92064
*Phone: (858) 218-3000*
*Fax: (360) 462-2742*
*After Hours Phone: (858) 218-3000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 16\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 9AM-5PM*

**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*

**SAN DIEGO**

**ABERCROMBIE, SHERI**
*Provider Gender: Female*
*License Number: PSY18536*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHERI ABERCROMBIE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM SA 8:30AM-4PM*

**ABERCROMBIE, SHERI**
*Provider Gender: Female*
*License Number: PSY18536*
*NPI: 1932292422*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHERI ABERCROMBIE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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: 2\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
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*

*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 2\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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
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
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**BAQIR, HUMA**
*Provider Gender: Female*
*License Number: A188608*
*NPI: 1306499132*
*Provider English Spoken: Y*
*Cultural Competency: N*
HUMA BAQIR
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

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

**BAQIR, HUMA**
*Provider Gender: Female*
*License Number: A188608*
*NPI: 1306499132*
*Provider English Spoken: Y*
*Cultural Competency: N*
HUMA BAQIR
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BAQIR, HUMA**
*Provider Gender: Female*
*License Number: A188608*
*NPI: 1306499132*
*Provider English Spoken: Y*
*Cultural Competency: N*
HUMA BAQIR
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BASS, GURGIANA**
*Provider Gender: Female*
*License Number: PSY24750*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
GURGIANA BASS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**BASS, GURGIANA**
*Provider Gender: Female*
*License Number: PSY24750*
*NPI: 1639325277*
*Provider English Spoken: Y*
*Cultural Competency: N*
GURGIANA BASS
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-4:30PM*
*TU 8AM-12PM*
*W 8AM-4:30PM*
*TH 8AM-12PM*

**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*

**CABALLERO, NOE**
*Provider Gender: Male*
*License Number: A181276*
*NPI: 1407483480*
*Provider English Spoken: Y*
*Cultural Competency: N*
NOE A CABALLERO
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CABALLERO, NOE**
*Provider Gender: Male*
*License Number: A181276*
*NPI: 1407483480*
*Provider English Spoken: Y*
*Cultural Competency: N*
NOE A CABALLERO
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CABALLERO, NOE**
*Provider Gender: Male*
*License Number: A181276*
*NPI: 1407483480*
*Provider English Spoken: Y*
*Cultural Competency: N*
NOE A CABALLERO

# I. Direktoryo ng Kalusugan ng Isip

200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CALLAGHAN, KATHRYN**
*Provider Gender: Female*
*License Number: MFC106901*
*NPI: 1558768812*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHRYN R CALLAGHAN
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site 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**
*Provider Gender: Female*
*License Number: LCS110194*
*NPI: 1093350258*
*Provider English Spoken: Y*
*Cultural Competency: N*
JACQUELINE 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*
*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**
*Provider Gender: Female*
*License Number: LCS110194*
*NPI: 1093350258*
*Provider English Spoken: Y*
*Cultural Competency: N*
JACQUELINE CEBALLOS
6973 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*

**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

# I. Direktoryo ng Kalusugan ng Isip

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CHOI, MIN**
*Provider Gender: Female*
*License Number: MFC135952*
*NPI: 1871195107*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIN H CHOI
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (858) 578-4417*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**CIOBANU, COSMINA**
*Provider Gender: Female*
*License Number: A137628*
*NPI: 1285049932*
*Provider English Spoken: Y*
*Cultural Competency: N*
COSMINA S CIOBANU
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 576-1700*
*Fax: (858) 966-8164*
*After Hours Phone: (858) 576-1700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*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
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
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**CRISOL, CAROLINE**
*Provider Gender: Female*
*License Number: MFC88616*
*NPI: 1962663617*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
CAROLINE M CRISOL LMFT INC
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 662-4158*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DEACON, CASSIE**
*Provider Gender: Female*
*License Number: LCS94105*
*NPI: 1720452998*
*Provider English Spoken: Y*
*Cultural Competency: N*
CASSIE C DEACON
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*

*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**DEACON, CASSIE**
*Provider Gender: Female*
*License Number: LCS94105*
*NPI: 1720452998*
*Provider English Spoken: Y*
*Cultural Competency: N*
CASSIE C DEACON
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8:30AM-5:30PM*
*TU 5:30PM-8:30PM*
*W-F 8:30AM-5:30PM*
*SA 9AM-4PM*

**DIAZ, JAENAI**
*Provider Gender: Female*
*License Number: LCS80689*
*NPI: 1508241811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JAENAI DIAZ
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DIAZ, JAENAI**
*Provider Gender: Female*
*License Number: LCS80689*
*NPI: 1508241811*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JAENAI DIAZ
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DIOKNO, RHODA**
*Provider Gender: Female*
*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) 234-0206*
*After Hours Phone: (619) 234-2158*

*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**DOSS, KATIE**
*Provider Gender: Female*
*License Number: LCS112693*
*NPI: 1134825979*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATIE L DOSS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**DSOUZA, NICOLE**
*Provider Gender: Male*
*License Number: LCS101958*
*NPI: 1225462799*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICOLE A DSOUZA
330 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**DUNN-PIRIO, ANASTASIE**
*Provider Gender: Female*
*License Number: A157861*
*NPI: 1700177136*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANASTASIE M DUNN-PIRIO
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (619) 543-3500*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 543-3500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ESPERANZA, MELIZZA**
*Provider Gender: Female*
*License Number: LCS100093*
*NPI: 1184763005*
*Provider English Spoken: Y*
*Cultural Competency: N*
MELIZZA R ESPERANZA
16918 DOVE CANYON RD STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**ESTAVILLO, SAUL**
*Provider Gender: Male*
*License Number: MFC102610*
*NPI: 1528330073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SAUL J ESTAVILLO
286 EUCLID AVE STE 309
SAN DIEGO, CA 92114
*Phone: (619) 527-7390*
*Fax: (619) 527-7394*
*After Hours Phone: (619) 527-7390*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ESTAVILLO, SAUL**
*Provider Gender: Male*
*License Number: MFC102610*
*NPI: 1528330073*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SAUL J ESTAVILLO
3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154
*Phone: (619) 662-4161*
*Fax: (619) 662-4109*
*After Hours Phone: (619) 662-4161*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

*Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FIRESTONE, MICHELLE**
*Provider Gender: Female*
*License Number: PSY33081*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE E FIRESTONE
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*

**FIRESTONE, MICHELLE**
*Provider Gender: Female*
*License Number: PSY33081*
*NPI: 1114687803*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHELLE E FIRESTONE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**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*

# I. Direktoryo ng Kalusugan ng Isip

*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) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**FRANK, GUIDO**
*Provider Gender: Male*
*License Number: A86429*
*NPI: 1578608733*
*Provider English Spoken: Y*
*Cultural Competency: N*
GUIDO K FRANK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
*Phone: (858) 966-8145*
*Fax: (858) 966-8154*
*After Hours Phone: (858) 966-8145*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FRY, LIANE**
*Provider Gender: Female*
*License Number: MFC42570*
*NPI: 1003110917*
*Provider English Spoken: Y*
*Cultural Competency: N*
LIANE M FRY
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
*Phone: (619) 662-4100*
*Fax: (619) 595-0258*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 12\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GARCIA, RICHARD**
*Provider Gender: Male*
*License Number: LCS28742*
*NPI: 1881198554*
*Provider English Spoken: Y*
*Cultural Competency: N*
RICHARD R GARCIA
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-4:30PM*

**GARCIA, JENNI**
*Provider Gender: Female*
*License Number: LPCC10346*
*NPI: 1437775863*

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JENNI GARCIA
3025 BEYER BLVD
SAN DIEGO, CA 92154
*Phone: (619) 662-4100*
*Fax: (619) 662-4119*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**GIAMONA, KRISTEN**
*Provider Gender: Female*
*License Number: PSY28419*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN M GIAMONA
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GIAMONA, KRISTEN**
*Provider Gender: Female*
*License Number: PSY28419*
*NPI: 1376824383*
*Provider English Spoken: Y*
*Cultural Competency: N*
KRISTEN M GIAMONA
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GOMEZ, JUANITA**
*Provider Gender: Female*
*License Number: PSY27439*
*NPI: 1790915759*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JUANITA GOMEZ
6030 VILLAGE WAY
SAN DIEGO, CA 92130
*Phone: (800) 926-8372*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8372*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**GULOTTA, SAMANTHA**
*Provider Gender: Female*
*License Number: MFC134199*
*NPI: 1790407732*
*Provider English Spoken: Y*
*Cultural Competency: N*

# I. Direktoryo ng Kalusugan ng Isip

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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
SILVIA E HERNANDEZ
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*
*Hours: M-F 8AM-5PM*

**KHAFAJA, MOHAMAD**
*Provider Gender: Male*
*License Number: A115892*
*NPI: 1780867119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
MOHAMAD H KHAFAJA
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**JOSHI, YASH**
*Provider Gender: Male*
*License Number: A147156*
*NPI: 1598151433*
*Provider English Spoken: Y*
*Cultural Competency: N*
YASH B JOSHI
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**KHAFAJA, MOHAMAD**
*Provider Gender: Male*
*License Number: A115892*
*NPI: 1780867119*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
MOHAMAD H KHAFAJA
6645 ALVARADO RD
SAN DIEGO, CA 92120

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KHAMISA, SORAIYA**
*Provider Gender: Female*
*License Number: LCS81951*
*NPI: 1811254386*
*Provider English Spoken: Y*
*Cultural Competency: N*
SORAIYA N KHAMISA
4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KLUEMPER, NICOLE**
*Provider Gender: Female*
*License Number: PSY27064*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICOLE S KLUEMPER
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 2\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KLUEMPER, NICOLE**
*Provider Gender: Female*
*License Number: PSY27064*
*NPI: 1902125818*
*Provider English Spoken: Y*
*Cultural Competency: N*
NICOLE S KLUEMPER
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 2\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**
*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M KRUCKENBERG
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**

*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M
KRUCKENBERG
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**

*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M
KRUCKENBERG
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KRUCKENBERG, KATHERINE**

*Provider Gender: Female*
*License Number: A184317*
*NPI: 1518595826*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M
KRUCKENBERG
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**KU, JUSTINE**

*Provider Gender: Female*
*License Number: A190175*
*NPI: 1205579703*
*Provider English Spoken: Y*
*Cultural Competency: N*
JUSTINE KU
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*

# I. Direktoryo ng Kalusugan ng Isip

**LABIB, MICHAEL**
*Provider Gender: Male*
*License Number: PSY34180*
*NPI: 1609055797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# I. Direktoryo ng Kalusugan ng Isip

**LEDBETTER, ALEX**
*Provider Gender: Male*
*License Number: 20A20454*
*NPI: 1073017315*
*Provider English Spoken: Y*
*Cultural Competency: N*
ALEX W LEDBETTER
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LEE, DAVID**
*Provider Gender: Male*
*License Number: A124329*
*NPI: 1871884130*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: N*
DAVID J LEE
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LI, XIA**
*Provider Gender: Female*
*License Number: A163344*
*NPI: 1336670413*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
XIA LI
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*

**LI, XIA**
*Provider Gender: Female*
*License Number: A163344*
*NPI: 1336670413*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Mandarin*
*Cultural Competency: N*
XIA LI
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LIU, TIMOTHY**
*Provider Gender: Male*
*License Number: A105535*

*NPI: 1720262801*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
TIMOTHY C LIU
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LIU, TIMOTHY**
*Provider Gender: Male*
*License Number: A105535*
*NPI: 1720262801*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese, Mandarin, Yue Chinese*
*Cultural Competency: N*
TIMOTHY C LIU
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**LONGARDNER, KATHERINE**
*Provider Gender: Female*
*License Number: A137963*
*NPI: 1801215926*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATHERINE M LONGARDNER
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MALAK, LAWRENCE**
*Provider Gender: Male*
*License Number: A115345*
*NPI: 1467773028*
*Provider English Spoken: Y*
*Cultural Competency: N*
LAWRENCE T MALAK
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MALAK, LAWRENCE**
*Provider Gender: Male*
*License Number: A115345*
*NPI: 1467773028*
*Provider English Spoken: Y*
*Cultural Competency: N*

# I. Direktoryo ng Kalusugan ng Isip

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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MARTINEZ, STEPHANIE**
*Provider Gender: Female*
*License Number: A152787*
*NPI: 1699126367*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
STEPHANIE MARTINEZ
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MCCULLUM, TIFFANY**
*Provider Gender: Female*
*License Number: PSY29329*
*NPI: 1528306206*
*Provider English Spoken: Y*
*Cultural Competency: N*
TIFFANY MCCULLUM
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 428-7952*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 13\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MEIER, EMILY**
*Provider Gender: Female*
*License Number: Psy25266*
*NPI: 1255530572*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A MEIER
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MILLER, MIKAELA**
*Provider Gender: Female*
*License Number: A181565*
*NPI: 1639752355*
*Provider English Spoken: Y*
*Cultural Competency: N*
MIKAELA G MILLER
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 14\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM SA 8AM-2PM*

**MILLS, BRAD**
*Provider Gender: Male*
*License Number: LCS87409*
*NPI: 1598542813*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
BRAD A MILLS

# I. Direktoryo ng Kalusugan ng Isip

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MIRON, JEAN-PHILIPPE**
*Provider Gender: Male*
*License Number: A186033*
*NPI: 1952178196*
*Provider English Spoken: Y*
*Cultural Competency: N*
JEAN-PHILIPPE MIRON
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MIRON, JEAN-PHILIPPE**
*Provider Gender: Male*
*License Number: A186033*
*NPI: 1952178196*
*Provider English Spoken: Y*
*Cultural Competency: N*
JEAN-PHILIPPE MIRON
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**MIRON, JEAN-PHILIPPE**
*Provider Gender: Male*
*License Number: A186033*
*NPI: 1952178196*
*Provider English Spoken: Y*
*Cultural Competency: N*
JEAN-PHILIPPE MIRON
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MOORE, SHAVON**
*Provider Gender: Female*
*License Number: A152789*
*NPI: 1053682773*
*Provider English Spoken: Y*
*Cultural Competency: N*
SHAVON C MOORE
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**MUHAMMAD, LAMA**
*Provider Gender: Female*
*License Number: A156500*
*NPI: 1558701623*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
LAMA MUHAMMAD
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*

**MUHAMMAD, LAMA**
*Provider Gender: Female*
*License Number: A156500*
*NPI: 1558701623*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: N*
LAMA MUHAMMAD
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NGUYEN, JULIA**
*Provider Gender: Female*
*License Number: A193351*
*NPI: 1881155232*
*Provider English Spoken: Y*
*Cultural Competency: N*
JULIA K NGUYEN
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NGUYEN, JULIA**
*Provider Gender: Female*
*License Number: A193351*
*NPI: 1881155232*
*Provider English Spoken: Y*
*Cultural Competency: N*
JULIA K NGUYEN
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**NGUYEN, HOANG**
*Provider Gender: Male*
*License Number: G83977*
*NPI: 1720011620*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
HOANG A NGUYEN
410 DICKINSON ST STE 100
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

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

**NING, GRACE**
*Provider Gender: Female*
*License Number: PSY27293*
*NPI: 1598911315*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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: 18\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*
*Provider Language(s) Spoken: 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: 18\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
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (619) 543-2827*
*After Hours Phone: (619) 543-2827*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**NORMAN, MARC**
*Provider Gender: Male*
*License Number: PSY16278*
*NPI: 1922169101*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARC A NORMAN
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ORFF, HENRY**
*Provider Gender: Male*

# I. Direktoryo ng Kalusugan ng Isip

*License Number: PSY27099*
*NPI: 1144685215*
*Provider English Spoken: Y*
*Cultural Competency: N*
HENRY J ORFF
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
*Phone: (844) 757-5337*
*After Hours Phone: (844) 757-5337*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**ORTIZ, MARIA**
*Provider Gender: Female*
*License Number: PSY30953*
*NPI: 1497980775*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MARIA E ORTIZ
950 S EUCLID AVE
SAN DIEGO, CA 92114
*Phone: (619) 662-4100*
*Fax: (619) 662-4158*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PASTORES, GLEN**
*Provider Gender: Male*
*License Number: MFC94162*
*NPI: 1609980234*
*Provider English Spoken: Y*
*Cultural Competency: N*
GLEN F PASTORES
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PATTON, MICHAEL**
*Provider Gender: Male*
*License Number: LCS18244*
*NPI: 1184756702*
*Provider English Spoken: Y*
*Cultural Competency: N*
MICHAEL A PATTON
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
*Phone: (619) 233-8500*
*Fax: (619) 687-1067*
*After Hours Phone: (619) 233-8500*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**PRINCE, RENEE**
*Provider Gender: Female*
*License Number: PSY32206*
*NPI: 1467737908*
*Provider English Spoken: Y*
*Cultural Competency: N*
RENEE K PRINCE
10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126
*Phone: (844) 200-2426*
*Fax: (619) 474-4008*
*After Hours Phone: (844) 200-2426*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-6PM*

**QAYOUMI, WALI**
*Provider Gender: Male*
*License Number: A168429*
*NPI: 1093178220*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: N*
WALI Z QAYOUMI
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
*Phone: (619) 294-3746*
*Fax: (888) 539-8781*
*After Hours Phone: (619) 294-3746*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RADOJEVIC, NATASHA**
*Provider Gender: Female*
*License Number: PSY28495*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
NATASHA RADOJEVIC
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*TH-F 8:30AM-5:30PM*

**RADOJEVIC, NATASHA**
*Provider Gender: Female*
*License Number: PSY28495*
*NPI: 1821365008*
*Provider English Spoken: Y*
*Cultural Competency: N*
NATASHA RADOJEVIC
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-TU 8:30AM-5:30PM*
*TH-F 8:30AM-5:30PM*

**RIBEIRO CALDAS DOMINGUES, ISABEL**
*Provider Gender: Female*
*License Number: A132160*
*NPI: 1023367216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish*

*Cultural Competency: N*
ISABEL A RIBEIRO CALDAS DOMINGUES
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RICHARD, MARLA**
*Provider Gender: Female*
*License Number: G65188*
*NPI: 1578720934*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARLA G RICHARD
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RICHARD, MARLA**
*Provider Gender: Female*
*License Number: G65188*
*NPI: 1578720934*
*Provider English Spoken: Y*
*Cultural Competency: N*
MARLA G RICHARD
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (800) 926-8273*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**RIVERA, KEVIN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN J RIVERA
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RIVERA, KEVIN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN J RIVERA
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*

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*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**RIVERA, KEVIN**
*Provider Gender: Male*
*License Number: A193862*
*NPI: 1760986715*
*Provider English Spoken: Y*
*Cultural Competency: N*
KEVIN J RIVERA
350 DICKINSON ST
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

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

**SAWYER, CAROLYN**
*Provider Gender: Female*
*License Number: A149116*
*NPI: 1043653249*
*Provider English Spoken: Y*
*Cultural Competency: N*
CAROLYN M SAWYER
7920 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 246-0794*
*Fax: (858) 496-9257*
*After Hours Phone: (858) 246-0794*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*

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

**SAWYER, CAROLYN**
*Provider Gender: Female*
*License Number: A149116*
*NPI: 1043653249*
*Provider English Spoken: Y*
*Cultural Competency: N*
CAROLYN M SAWYER
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
*Phone: (858) 966-4032*
*Fax: (858) 966-6227*
*After Hours Phone: (858) 966-4032*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\19*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*

**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*

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# I. Direktoryo ng Kalusugan ng Isip

**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*

**SCHNEEBERGER, ANDRES**
*Provider Gender: Male*
*License Number: C175502*
*NPI: 1184867376*
*Provider English Spoken: Y*
*Cultural Competency: N*
ANDRES R SCHNEEBERGER
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SERIO, TAYLOR**
*Provider Gender: Female*
*License Number: LCS107050*
*NPI: 1093217382*
*Provider English Spoken: Y*
*Cultural Competency: N*
TAYLOR L SERIO
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*

**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

# I. Direktoryo ng Kalusugan ng Isip

*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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*

**SUAREZ, ROBERTO**
*Provider Gender: Male*
*License Number: MFC25098*
*NPI: 1386785160*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ROBERTO SUAREZ
3025 BEYER BLVD
SAN DIEGO, CA 92154
*Phone: (619) 662-4100*
*Fax: (619) 662-4119*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*

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*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SUTHERLAND, PAIGE**
*Provider Gender: Female*
*License Number: A178168*
*NPI: 1235767245*
*Provider English Spoken: Y*
*Cultural Competency: N*
PAIGE A SUTHERLAND
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**SWEIGERT, JAMIE**
*Provider Gender: Female*
*License Number: LCS112304*
*NPI: 1396353595*
*Provider English Spoken: Y*
*Cultural Competency: N*
JAMIE L SWEIGERT
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**TARLE, STEPHANIE**
*Provider Gender: Female*
*License Number: PSY32155*
*NPI: 1659920403*
*Provider English Spoken: Y*
*Cultural Competency: N*
STEPHANIE J TARLE
6655 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**THACKABERRY, JESSICA**
*Provider Gender: Female*
*License Number: A128967*
*NPI: 1134478910*
*Provider English Spoken: Y*
*Cultural Competency: N*
JESSICA L THACKABERRY
6645 ALVARADO RD
SAN DIEGO, CA 92120
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

*N*
*Accessibility: CONTACT PROVIDER*

**TILTON, PETER**
*Provider Gender: Male*
*License Number: G27781*
*NPI: 1538258694*
*Provider English Spoken: Y*
*Cultural Competency: N*
PETER A TILTON
2630 1ST AVE
SAN DIEGO, CA 92103
*Phone: (619) 234-2158*
*Fax: (619) 234-0206*
*After Hours Phone: (619) 234-2158*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TO, TUAN**
*Provider Gender: Male*
*License Number: PSY30204*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
TUAN TO
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TO, TUAN**
*Provider Gender: Male*
*License Number: PSY30204*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
TUAN TO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**TO, TUAN**
*Provider Gender: Male*
*License Number: PSY30204*
*NPI: 1255696183*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: N*
TUAN TO
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 810-8700*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 810-8700*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 5\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# I. Direktoryo ng Kalusugan ng Isip

**TROYER, EMILY**
*Provider Gender: Female*
*License Number: A149101*
*NPI: 1326484437*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A TROYER
4290 POLK AVE
SAN DIEGO, CA 92105
*Phone: (619) 563-0250*
*Fax: (858) 633-4681*
*After Hours Phone: (619) 563-0250*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 8AM-2PM*

**TROYER, EMILY**
*Provider Gender: Female*
*License Number: A149101*
*NPI: 1326484437*
*Provider English Spoken: Y*
*Cultural Competency: N*
EMILY A TROYER
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
*Phone: (619) 280-2058*
*Fax: (858) 633-4682*
*After Hours Phone: (619) 280-2058*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*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*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: N*
RAISA YAGUDAYEVA
200 W ARBOR DR
SAN DIEGO, CA 92103
*Phone: (800) 926-8273*
*Fax: (888) 539-8781*
*After Hours Phone: (800) 926-8273*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**YIDI, DIANA**
*Provider Gender: Female*
*License Number: LCS110300*
*NPI: 1194438663*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
DIANA L YIDI
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
*Phone: (858) 279-0925*
*Fax: (858) 633-4680*
*After Hours Phone: (858) 279-0925*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8:30AM-5:30PM*

**ZAYAS, MARIO**
*Provider Gender: Male*
*License Number: MFC111273*
*NPI: 1275943557*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MARIO E ZAYAS
3025 BEYER BLVD STE E-101
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*

*Hours: M-TU 9AM-7PM W-F 9AM-6PM*

**ZIMMERMAN, JENNIFER**

*Provider Gender: Female*

*License Number: LCS28729*

*NPI: 1811449077*

*Provider English Spoken: Y*

*Cultural Competency: N*

JENNIFER A ZIMMERMAN

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

*Phone: (858) 279-9676*

*Fax: (858) 633-4680*

*After Hours Phone: (858) 279-9676*

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: 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*

*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*

## SAN MARCOS

**ALTAMIRANO, LEON**

*Provider Gender: Male*

*License Number: PSY23734*

*NPI: 1619271517*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

LEON ALTAMIRANO

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

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

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

**ARIELLA, LYNDA**

*Provider Gender: Female*

*License Number: PSY19450*

*NPI: 1073518965*

*Provider English Spoken: Y*

*Cultural Competency: N*

LYNDA R ARIELLA

150 VALPREDA RD
SAN MARCOS, CA 92069

*Phone: (760) 736-6767*

*Fax: (760) 736-6744*

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

*Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*TDD: U*
*Min/Max Age: 5\50*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CABREJOS, CLAUDIO**
*Provider Gender: Male*
*License Number: A71653*
*NPI: 1033133483*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese, Spanish*
*Cultural Competency: N*
CLAUDIO O CABREJOS
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**FLYNN, DANIELLE**
*Provider Gender: Female*
*License Number: PSY26184*
*NPI: 1477785137*
*Provider English Spoken: Y*
*Cultural Competency: N*
DANIELLE I FLYNN
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\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) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

**IMAM, SYED**
*Provider Gender: Male*
*License Number: PSY27695*
*NPI: 1447428271*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Urdu*
*Cultural Competency: N*
SYED IMAM
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 15\None*

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**REEG, JESSICA**
*Provider Gender: Female*
*License Number: MFC124306*
*NPI: 1144382987*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
JESSICA REEG
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-5PM*

**TONG, GARRICK**
*Provider Gender: Male*
*License Number: A102192*
*NPI: 1831361278*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Cantonese*
*Cultural Competency: N*
GARRICK G TONG
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
HECTOR M TORRES
150 VALPREDA RD
SAN MARCOS, CA 92069
*Phone: (760) 736-6767*
*Fax: (760) 736-6744*
*After Hours Phone: (760) 736-6767*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\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*
*Provider Language(s) Spoken: Tagalog*
*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)*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**CRAWFORD-DAY, ANN**
*Provider Gender: Female*
*License Number: A166646*
*NPI: 1386149706*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ANN E CRAWFORD-DAY
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*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*
*SA 8AM-2PM*

**FONTANA, LOUIS**
*Provider Gender: Male*
*License Number: G49072*
*NPI: 1780734343*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
LOUIS A FONTANA
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-2PM*

**GONZALEZ-GARCIA, CAROLINA**
*Provider Gender: Female*
*License Number: MFC41111*
*NPI: 1215321955*
*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
CAROLINA GONZALES GARCIA
3364 BEYER BLVD
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: 18\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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
BERENICE B IBANEZ
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**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 Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-2PM*

**JIMENEZ, NANCY**
*Provider Gender: Female*
*License Number: MFC141209*
*NPI: 1568023596*

# I. Direktoryo ng Kalusugan ng Isip

*Provider English Spoken: Y*
*Cultural Competency: N*
NANCY JIMENEZ
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**LOPEZ, MARIBEL**
*Provider Gender: Female*
*License Number: LCS86171*
*NPI: 1669180600*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
MARIBEL, LOPEZ
4004 BEYER BLVD
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 205-6305*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-8PM*
*SA 8AM-2PM*

**PETERSEN, KATE**
*Provider Gender: Female*
*License Number: MFC130200*
*NPI: 1598237281*
*Provider English Spoken: Y*
*Cultural Competency: N*
KATE PETERSEN
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
*Phone: (619) 662-4100*
*Fax: (619) 785-3384*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

**SANTEE**

**ALVAREZ, ILIAN**
*Provider Gender: Female*
*License Number: PSY28928*
*NPI: 1881842946*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
ILIAN ALVAREZ
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*
*Site Languages(s) Spoken: Spanish*
*TDD: U*
*Min/Max Age: 10\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

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# I. Direktoryo ng Kalusugan ng Isip

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

**MEAGHER, RAISHELLE**
*Provider Gender: Female*
*License Number: LCS109804*
*NPI: 1851821904*
*Provider English Spoken: Y*
*Cultural Competency: N*
RAISHELLE L MEAGHER
120 TOWN CENTER PKWY
SANTEE, CA 92071
*Phone: (619) 662-4100*
*Fax: (619) 662-4196*
*After Hours Phone: (619) 662-4100*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*

## VALLEY CENTER

**PLASCENCIA, CINDY**
*Provider Gender: Female*
*License Number: MFC113536*
*NPI: 1952723736*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
CINDY PLASCENCIA
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
*Phone: (760) 742-9919*
*Fax: (360) 462-2750*
*After Hours Phone: (760) 742-9919*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

## VISTA

**BARUCH, VANIA**
*Provider Gender: Female*
*License Number: LCS102454*
*NPI: 1205469053*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANIA M BARUCH
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 8AM-7PM*
*W 8AM-6:30PM*
*TH 8:30AM-7PM*
*F 8:30AM-12PM*

**BARUCH, VANIA**
*Provider Gender: Female*
*License Number: LCS102454*
*NPI: 1205469053*
*Provider English Spoken: Y*
*Cultural Competency: N*
VANIA M BARUCH
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-7PM*
*W 8AM-6:30PM*
*TH 8:30AM-7PM*
*F 8:30AM-12PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu*
*TDD: U*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**BELL, JENNIFER**
*Provider Gender: Female*
*License Number: 20A20702*
*NPI: 1154614956*
*Provider English Spoken: Y*
*Cultural Competency: N*
JENNIFER L BELL
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Lithuanian, Urdu, Chinese, Vietnamese, Farsi, Tagalog, Arabic, Spanish*
*TDD: U*
*Min/Max Age: 5\80*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M-F 8AM-5PM*
*SA 9AM-4PM*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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-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: 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
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*

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*SA 9AM-4PM*

**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*

**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*

**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*

**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*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
134 GRAPEVINE RD
VISTA, CA 92083
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**PATEL, MITESH**
*Provider Gender: Male*
*License Number: A181164*
*NPI: 1568880292*
*Provider English Spoken: Y*
*Cultural Competency: N*
MITESH K PATEL
1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*Fax: (760) 414-3892*
*After Hours Phone: (760) 631-5000*
*Website: N/A*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*TDD: U*
*Min/Max Age: 18\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Hours: M 8AM-5PM*
*TU 10AM-7PM*
*W-F 8AM-5PM*
*SA 9AM-4PM*

**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*

**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*

**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
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*

**SMITH, SONYA**
*Provider Gender: Female*
*License Number: LCS82598*
*NPI: 1902070857*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: N*
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*

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*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

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-F 8AM-5PM SA 9AM-4PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

## ALPINE

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**BAUMANN, DANIELA, OD**
*Provider Gender: Female*
*License Number: 34530*
*NPI: 1982232146*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**DYER, SHARON, OD**

*Provider Gender: Female*

*License Number: 33450*

*NPI: 1063866887*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

*Phone: (619) 445-2687*

*Fax: (619) 445-0801*

*After Hours Phone: (619) 445-2687*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**HUANG, GRACE, OD**

*Provider Gender: Female*

*License Number: 35485*

*NPI: 1013605526*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

*Phone: (619) 445-2687*

*Fax: (619) 445-0801*

*After Hours Phone: (619) 445-2687*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KALBAKJI, NATALY, OD**

*Provider Gender: Female*

*License Number: 34943*

*NPI: 1700556438*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: Y*

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

*Phone: (619) 445-2687*

*Fax: (619) 445-0801*

*After Hours Phone: (619) 445-2687*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KATZMAN, BARRY, MD**

*Provider Gender: Male*

*License Number: A34834*

*NPI: 1760473797*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619)*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
*Phone: (619) 445-2687*
*Fax: (619) 445-0801*
*After Hours Phone: (619) 445-2687*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-5PM*
*TU 10AM-6PM*
*W 9AM-5PM*
*TH 8AM-5PM*
*F 9AM-4PM*

## BONITA

**CHA, DANIEL, OD**
*Provider Gender: Male*
*License Number: 14779*
*NPI: 1386078020*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYECARE OF BONITA
4502 BONITA RD
BONITA, CA 91902
*Phone: (619) 479-7334*
*Fax: (619) 475-3456*
*After Hours Phone: (619) 479-7334*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-6:30PM*
*W 8AM-6PM*
*TH 8AM-1PM*
*F 8AM-6PM*
*SA 9AM-2PM*

## CARLSBAD

**HO, TRAM, OD**
*Provider Gender: Female*
*License Number: 13485*
*NPI: 1245464460*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
EYE STYLE OPTOMETRY
5814 VAN ALLEN WAY STE 146
CARLSBAD, CA 92008
*Phone: (760) 606-2020*
*After Hours Phone: (760) 606-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\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*

**RAMOLIA, ANIKA, OD**
*Provider Gender: Female*
*License Number: 13802*
*NPI: 1205084787*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi, Spanish*
*Cultural Competency: Y*
BEACON OPTOMETRY
7720 EL CAMINO REAL STE G
CARLSBAD, CA 92009
*Phone: (760) 278-8068*
*Fax: (760) 278-3539*
*After Hours Phone: (760) 278-8068*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 8:30AM-5PM*
*TH 10:30AM-7PM*
*F 8:30AM-5PM*

**THAN, CINDY, OD**
*Provider Gender: Female*
*License Number: 13602*
*NPI: 1316103633*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
PIER VISION OPTOMETRY
2525 EL CAMINO REAL STE 125
CARLSBAD, CA 92008
*Phone: (760) 912-5552*
*Fax: (619) 996-0700*
*After Hours Phone: (760) 912-5552*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: TU-F 11AM-6PM*
*SA 11AM-6PM*

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# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

## CHULA VISTA

**CASTILLEJOS, DAVID, MD**
*Provider Gender: Male*
*License Number: A44482*
*NPI: 1558446401*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Portuguese, Spanish, Tagalog*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**CASTILLEJOS, MARIA, MD**
*Provider Gender: Female*
*License Number: A37652*
*NPI: 1043395098*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**CHAN, KWOK FUNG, OD**
*Provider Gender: Male*
*License Number: 35087*
*NPI: 1407508385*
*Provider English Spoken: Y*
*Cultural Competency: Y*
VILLA OPTOMETRY INC
523 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
*Phone: (619) 482-2020*
*Fax: (619) 482-2671*
*After Hours Phone: (619) 482-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 11AM-6PM*
*TH-F 9AM-6PM*

**CHISHOLM, KAREN, OD**
*License Number: 35450*
*NPI: 1568155190*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE

101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: 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*

**HUANG, PETER, OD**
*Provider Gender: Male*
*License Number: 11659*
*NPI: 1639100522*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
PETER D HUANG OD INC
557 H ST
CHULA VISTA, CA 91910
*Phone: (619) 422-0139*
*Fax: (619) 422-0066*
*After Hours Phone: (619) 422-0139*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 8AM-4PM*
*SA 9AM-2PM*

**KALRA, ANKUR, OD**
*Provider Gender: Male*
*License Number: 11898*
*NPI: 1124195789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*Site Languages(s) Spoken: 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*

**KIM, JENNY, OD**
*Provider Gender: Female*
*License Number: 35831*
*NPI: 1497588362*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: 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*
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*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ESSENTIAL EYECARE OPTOMETRY
345 F ST STE 240
CHULA VISTA, CA 91910
*Phone: (858) 467-0655*
*Fax: (619) 425-9797*
*After Hours Phone: (858) 467-0655*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 10AM-3PM*

**PHAM, NINA, OD**
*Provider Gender: Female*
*License Number: 35360*
*NPI: 1598403867*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**PLUCINIK, STANLEY, OD**
*Provider Gender: Male*
*License Number: 35255*
*NPI: 1124751417*
*Provider English Spoken: Y*
*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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**SCOVILL, ALEXANDRA, OD**
*Provider Gender: Female*
*License Number: 33711*
*NPI: 1184146094*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
*Phone: (619) 422-1471*
*Fax: (619) 271-7044*
*After Hours Phone: (619) 422-1471*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-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): 1T*
*Hours: M 8AM-5PM*
*TU 7AM-5PM*
*W-F 8AM-5PM*

**TOUBIA, ELIAS, OD**
*Provider Gender: Male*
*License Number: 33758*
*NPI: 1740701481*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Hours: SU 10AM-4PM*
*M-F 9AM-7PM*
*SA 9AM-5PM*

**TRINH, RACHELLE, OD**
*Provider Gender: Female*
*License Number: 35531*
*NPI: 1467139287*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
*Phone: (619) 421-6600*
*Fax: (619) 421-6006*
*After Hours Phone: (619) 421-6600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
VILLA OPTOMETRY INC
523 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
*Phone: (619) 482-2020*
*Fax: (619) 482-2671*
*After Hours Phone: (619) 482-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 11AM-6PM*
*TH-F 9AM-6PM*

## CORONADO

**COCKERHAM, KIMBERLY, MD**
*Provider Gender: Female*
*License Number: G86885*
*NPI: 1366493629*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**GRAY, IGA, MD**
*Provider Gender: Female*
*License Number: A174875*
*NPI: 1033538350*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**KATZMAN, LEE, MD**
*Provider Gender: Male*
*License Number: A135673*
*NPI: 1912297284*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**MANNEN, JOSEPH, OD**
*Provider Gender: Male*
*License Number: 33650*
*NPI: 1851827034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**OU, JOCELYN, OD**
*Provider Gender: Female*
*License Number: 34063*
*NPI: 1225518996*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

**YOUNG, ALLA, OD**
*Provider Gender: Female*
*License Number: 34191*
*NPI: 1285085142*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Provider Language(s) Spoken: Russian*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
*Phone: (619) 437-4406*
*Fax: (619) 522-7983*
*After Hours Phone: (619) 437-4406*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9AM-4:30PM*
*TU 9AM-3PM*
*W-TH 9AM-4:30PM*

## EL CAJON

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**ASIS, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 34013*
*NPI: 1902383540*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**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*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**BUTLER, KIM, OD**
*Provider Gender: Male*
*License Number: 6405*
*NPI: 1467444844*
*Provider English Spoken: Y*
*Cultural Competency: Y*
KIM J BUTLER OD
1273 BROADWAY
EL CAJON, CA 92021
*Phone: (619) 579-2345*
*Fax: (619) 579-0876*
*After Hours Phone: (619) 579-2345*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 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*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Hours: M-F 8:30AM-6PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**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*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**HSU, CHRISTOPHER, MD**
*Provider Gender: Male*
*License Number: A65973*
*NPI: 1336167618*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Hours: M-F 8:30AM-6PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8:30AM-6PM*

**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*

**MARYOUNG, ALLISON, OD**

*Provider Gender: Female*

*License Number: 35512*

*NPI: 1083309124*

*Provider English Spoken: Y*

*Cultural Competency: Y*

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

*Phone: (619) 440-5400*

*Fax: (619) 440-0239*

*After Hours Phone: (619) 440-5400*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 8:30AM-6PM*

**MCMURREN, BRITTANY, OD**

*Provider Gender: Female*

*License Number: 14824*

*NPI: 1104243815*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WERNER OPTOMETRY

2650 JAMACHA RD STE 155
EL CAJON, CA 92019

*Phone: (619) 670-6296*

*Fax: (619) 670-8852*

*After Hours Phone: (619) 670-6296*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Italian, Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**PANDYA, BHUMIKA, OD**

*Provider Gender: Female*

*License Number: 35025*

*NPI: 1063182822*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: Y*

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

*Phone: (619) 440-5400*

*Fax: (619) 440-0239*

*After Hours Phone: (619) 440-5400*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**SCOTT, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 34978*
*NPI: 1568813434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**TONNU, ANH, OD**
*Provider Gender: Female*
*License Number: 11318*
*NPI: 1679521280*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**WERNER, R AARON, OD**
*Provider Gender: Male*
*License Number: 13478*
*NPI: 1821259458*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
*Phone: (619) 670-6296*
*Fax: (619) 670-8852*
*After Hours Phone: (619) 670-6296*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Site Languages(s) Spoken: Italian, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**WERNER, REX, OD**
*Provider Gender: Male*
*License Number: 9378*
*NPI: 1891760716*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Italian, Spanish*
*Cultural Competency: Y*
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
*Phone: (619) 670-6296*
*Fax: (619) 670-8852*
*After Hours Phone: (619) 670-6296*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Italian, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

**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 9AM-5PM*
*TU 10AM-5PM*
*W-TH 9AM-5PM*
*F 8AM-2PM*

**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*
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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
*Phone: (619) 440-5400*
*Fax: (619) 440-0239*
*After Hours Phone: (619) 440-5400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-6PM*

## ENCINITAS

**ADAMS, MONA, OD**
*Provider Gender: Female*
*License Number: 14457*
*NPI: 1942564521*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANSAL, PREETI, MD**
*Provider Gender: Female*
*License Number: A90890*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**BAUMANN, DANIELA, OD**
*Provider Gender: Female*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No 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*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**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*

**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*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

*1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**LEE, JASON, OD**
*Provider Gender: Male*
*License Number: 14881*
*NPI: 1679985584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
*Phone: (858) 309-7702*
*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**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*

*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*

*Provider Language(s) Spoken: Indonesian, Spanish*

*Cultural Competency: Y*

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

*Phone: (760) 943-7141*

*Fax: (760) 943-0371*

*After Hours Phone: (760) 943-7141*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

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

**O HALLORAN, HENRY, MD**

*Provider Gender: Male*

*License Number: A73282*

*NPI: 1235287947*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: German, Spanish*

*Cultural Competency: Y*

RADY CHILDRENS HOSPITAL ENCINITAS

477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024

*Phone: (858) 309-7702*

*Fax: (858) 966-7403*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**SAMUEL, MICHAEL, MD**
*Provider Gender: Male*
*License Number: A83237*
*NPI: 1730175670*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZHAO, TAILUN, MD**
*Provider Gender: Male*
*License Number: C186414*
*NPI: 1952659203*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
*Phone: (760) 943-7141*
*Fax: (760) 943-0371*
*After Hours Phone: (760) 943-7141*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

## ESCONDIDO

**ADAMS, MONA, OD**
*Provider Gender: Female*
*License Number: 14457*
*NPI: 1942564521*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**ASIS, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 34013*
*NPI: 1902383540*
*Provider English Spoken: Y*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANDAK, DIANA, OD**
*Provider Gender: Female*
*License Number: 34850*
*NPI: 1235805318*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BANSAL, PREETI, MD**
*Provider Gender: Female*
*License Number: A90890*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

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

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*

**BERGMARK, JAMIE, OD**
*Provider Gender: Female*
*License Number: 33657*
*NPI: 1669920757*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**BHATIA, SHAGUN, MD**
*Provider Gender: Female*
*License Number: A154902*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHANG, TOM, MD**
*Provider Gender: Male*
*License Number: A69909*
*NPI: 1609848969*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**CHAU, VIVIAN, OD**
*Provider Gender: Female*
*License Number: 35427*
*NPI: 1558052951*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**DUONG, KIM, OD**
*Provider Gender: Female*
*License Number: 34222*
*NPI: 1114448651*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**GOLDSTONE, ADAM, OD**
*Provider Gender: Male*
*License Number: 11051*
*NPI: 1316972995*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*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*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KARAPETIAN, ELENA, OD**
*Provider Gender: Female*
*License Number: 34514*
*NPI: 1184250417*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KLAREN, AMANDA, OD**
*Provider Gender: Female*
*License Number: 12617*
*NPI: 1396876611*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**KWAK, ANGELA, OD**
*Provider Gender: Female*
*License Number: 13692*
*NPI: 1255564860*
*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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**LE, TAM, OD**
*Provider Gender: Female*
*License Number: 12951*
*NPI: 1235268707*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
TAM T LE OD INC
1711 E VALLEY PKWY STE 109
ESCONDIDO, CA 92027
*Phone: (760) 737-6064*
*Fax: (760) 737-6064*
*After Hours Phone: (760) 737-6064*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 9AM-5:30PM F 9AM-1PM*

**LEE, JASON, OD**
*Provider Gender: Male*
*License Number: 14881*
*NPI: 1679985584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**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*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**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 8AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MOVAGHAR, MANSOOR, MD**
*Provider Gender: Male*
*License Number: A100897*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*NPI: 1497792220*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**O HALLORAN, HENRY, MD**
*Provider Gender: Male*
*License Number: A73282*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**PANSARA, MEGHA, MD**
*Provider Gender: Female*
*License Number: A143429*
*NPI: 1184983728*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**SAMUEL, MICHAEL, MD**
*Provider Gender: Male*
*License Number: A83237*
*NPI: 1730175670*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**THACH, TERILYN, OD**
*Provider Gender: Female*
*License Number: 11456*
*NPI: 1710030861*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
INSIGHT VISION OPTOMETRY
2419 E VALLEY PKWY
ESCONDIDO, CA 92027
*Phone: (760) 738-9931*
*Fax: (760) 888-2181*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*After Hours Phone: (760) 738-9931*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9:30AM-5PM TH 10AM-6PM F 9:30AM-5PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TRAN, ALEXANDER, OD**
*Provider Gender: Male*
*License Number: 14136*
*NPI: 1902414790*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
*Phone: (760) 755-7600*
*Fax: (760) 755-7699*
*After Hours Phone: (760) 755-7600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-4:30PM*

**VERRET, ERIC, OD**
*Provider Gender: Male*
*License Number: 11401*

*NPI: 1194891853*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish*
*Cultural Competency: Y*
ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025
*Phone: (760) 747-7979*
*Fax: (760) 747-7799*
*After Hours Phone: (760) 747-7979*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, French, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM W-TH 9AM-8PM*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
*Phone: (760) 743-5872*
*Fax: (760) 743-5879*
*After Hours Phone: (760) 743-5872*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

## FALLBROOK

**ARCHIBALD, JOHN, OD**
*Provider Gender: Male*
*License Number: 11813*
*NPI: 1902893357*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**COLEMAN, BROOKE, OD**
*Provider Gender: Female*
*License Number: 13551*
*NPI: 1700040748*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**CONNOR, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 33683*
*NPI: 1063968980*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**COOPER, MICHAEL, OD**
*Provider Gender: Male*
*License Number: 10476*
*NPI: 1164586244*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**DUONG, CHERYL, OD**
*Provider Gender: Female*
*License Number: 34070*
*NPI: 1366935678*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**GEORGE, KENDALL, OD**
*Provider Gender: Male*
*License Number: 34270*
*NPI: 1619529948*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
1102 S MAIN AVE
FALLBROOK, CA 92028
*Phone: (760) 723-8417*
*Fax: (760) 758-2063*
*After Hours Phone: (760) 723-8417*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 1PM-5PM*
*W 9AM-6PM*
*F 1PM-5PM*

**GEORGE, BRUCE, OD**
*Provider Gender: Male*
*License Number: 7696*
*NPI: 1356414551*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
1102 S MAIN AVE
FALLBROOK, CA 92028
*Phone: (760) 723-8417*
*Fax: (760) 758-2063*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*After Hours Phone: (760) 723-8417*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 1PM-5PM*
*W 9AM-6PM*
*F 1PM-5PM*

**KHINDA, SUNEHA, OD**
*Provider Gender: Female*
*License Number: 35494*
*NPI: 1750066726*
*Provider English Spoken: Y*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TEW, JOHN, MD**
*Provider Gender: Male*
*License Number: A83206*
*NPI: 1174593354*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Portuguese*
*Cultural Competency: Y*
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
*Phone: (760) 728-5728*
*Fax: (760) 728-5934*
*After Hours Phone: (760) 728-5728*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

## IMPERIAL BEACH

**HANONO, HELFON, OD**
*Provider Gender: Male*
*License Number: 6681*
*NPI: 1619942034*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
IMPERIAL BEACH
OPTOMETRY INC APC
894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
*Phone: (619) 424-9333*
*Fax: (619) 424-3356*
*After Hours Phone: (619) 424-9333*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM*

**HANONO, ABRAHAM, OD**
*Provider Gender: Male*

*License Number: 14900*
*NPI: 1356754741*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hebrew, Spanish*
*Cultural Competency: Y*
IMPERIAL BEACH OPTOMETRY INC APC
894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
*Phone: (619) 424-9333*
*Fax: (619) 424-3356*
*After Hours Phone: (619) 424-9333*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM*

## LA JOLLA

**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*

**CODEN, DANIEL, MD**
*Provider Gender: Male*
*License Number: G57587*
*NPI: 1942317508*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**HOO, PAMELA, OD**
*Provider Gender: Female*
*License Number: 11033*
*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**HOO, PAMELA, OD**
*Provider Gender: Female*
*License Number: 11033*
*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HUSTANA, LARA, OD**
*Provider Gender: Female*
*License Number: 11472*
*NPI: 1235161597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B

LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**HUSTANA, LARA, OD**
*Provider Gender: Female*
*License Number: 11472*
*NPI: 1235161597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**KULISCHAK, JOHN, OD**
*Provider Gender: Male*
*License Number: 9279*
*NPI: 1740205236*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**KULISCHAK, JOHN, OD**
*Provider Gender: Male*
*License Number: 9279*
*NPI: 1740205236*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**LAM, ANNE, OD**
*Provider Gender: Female*
*License Number: 12810*
*NPI: 1174550768*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**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 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*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

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

**MCCLEAN, ESMERALDA, OD**
*Provider Gender: Female*
*License Number: 15001*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MIZOGUCHI, LIANNE, OD**
*Provider Gender: Female*
*License Number: 10104*
*NPI: 1619900313*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MIZOGUCHI, LIANNE, OD**
*Provider Gender: Female*
*License Number: 10104*
*NPI: 1619900313*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PERRY, ARTHUR, MD**
*Provider Gender: Male*
*License Number: C37934*
*NPI: 1194832725*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PRATT, STEVEN, MD**
*Provider Gender: Male*
*License Number: G32379*
*NPI: 1407963044*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TONNU, ANH, OD**
*Provider Gender: Female*
*License Number: 11318*
*NPI: 1679521280*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

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*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**VO, ANDREW MINH, OD**
*Provider Gender: Male*
*License Number: 33869*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**VO, ANDREW MINH, OD**
*Provider Gender: Male*
*License Number: 33869*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*

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# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

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

**YU, CAROL, OD**
*Provider Gender: Female*
*License Number: 34047*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM SA 8AM-2PM*

**YU, CAROL, OD**
*Provider Gender: Female*
*License Number: 34047*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
PERLMAN OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4:30PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**ZHAO, TAILUN, MD**
*Provider Gender: Male*
*License Number: C186414*
*NPI: 1952659203*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
*Phone: (858) 457-3010*
*Fax: (858) 457-0028*
*After Hours Phone: (858) 457-3010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

**ZVANUT, DONALD, OD**

*Provider Gender: Male*

*License Number: 8642*

*NPI: 1336211804*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

9850 GENESEE AVE STE 310
LA JOLLA, CA 92037

*Phone: (858) 457-3010*

*Fax: (858) 457-0028*

*After Hours Phone: (858) 457-3010*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish, Tagalog*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

## LA MESA

**AOTO, KIM, OD**

*Provider Gender: Female*

*License Number: 14524*

*NPI: 1780935650*

*Provider English Spoken: Y*

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

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

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

**ASIS, STEPHANIE, OD**

*Provider Gender: Female*

*License Number: 34013*

*NPI: 1902383540*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

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

**AVALLONE, THOMAS, MD**

*Provider Gender: Male*

*License Number: A147199*

*NPI: 1679865950*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

*Phone: (619) 465-2020*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**BAGHOUMIAN, MARINEH, OD**
*Provider Gender: Female*
*License Number: 14842*
*NPI: 1972929438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Armenian*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**BAUMANN, DANIELA, OD**
*Provider Gender: Female*
*License Number: 34530*
*NPI: 1982232146*
*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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
BUITIQUE OPTOMETRY
5020 BALTIMORE DR STE B
LA MESA, CA 91942
*Phone: (619) 464-8303*
*Fax: (619) 464-4971*
*After Hours Phone: (619) 464-8303*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-2PM*

**CHANG, TOM, MD**
*Provider Gender: Male*
*License Number: A69909*
*NPI: 1609848969*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**CHEW, WESLEY, OD**
*Provider Gender: Male*
*License Number: 14901*
*NPI: 1952714446*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**COCKERHAM, KIMBERLY, MD**
*Provider Gender: Female*
*License Number: G86885*
*NPI: 1366493629*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**CONRAD, RANDALL, OD**
*Provider Gender: Male*
*License Number: 6423*
*NPI: 1962617464*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken:*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: 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*
*Provider Language(s) Spoken: German, French, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**GOLLOGLY, HEIDRUN, MD**
*Provider Gender: Female*
*License Number: A134761*
*NPI: 1477879823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, French, Spanish*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

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*

**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*
*Provider Language(s) Spoken: Korean*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

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# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

**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*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

**HUDSON, HENRY, MD**

*Provider Gender: Male*

*License Number: G76091*

*NPI: 1851349195*

*Provider English Spoken: Y*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

*Phone: (619) 465-2020*

*Fax: (619) 698-1189*

*After Hours Phone: (619) 465-2020*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

**HUDSON, HENRY, MD**

*Provider Gender: Male*

*License Number: G76091*

*NPI: 1851349195*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

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

**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*

*Provider Language(s) Spoken: Arabic*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**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*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**LEE, SALLY, DO**
*Provider Gender: Female*
*License Number: 20A8088*
*NPI: 1457468514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
SAN DIEGO EYE PROFESSIONALS
8291 LA MESA BLVD
LA MESA, CA 91942
*Phone: (619) 583-4295*
*Fax: (619) 393-1133*
*After Hours Phone: (619) 583-4295*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: German, Spanish, Chinese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TU-F 9AM-5PM SA 9AM-5PM*

**LEVY, PHILLIP, OD**
*Provider Gender: Male*
*License Number: 4884*
*NPI: 1528189115*
*Provider English Spoken: Y*
*Cultural Competency: Y*
BUITIQUE OPTOMETRY
5020 BALTIMORE DR STE B
LA MESA, CA 91942
*Phone: (619) 464-8303*
*Fax: (619) 464-4971*
*After Hours Phone: (619) 464-8303*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-2PM*

**MANNEN, JOSEPH, OD**
*Provider Gender: Male*
*License Number: 33650*
*NPI: 1851827034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*
*After Hours Phone: (619) 460-3711*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8:30AM-4:30PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No 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*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE

J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**MERALI, MURTAZA, OD**
*Provider Gender: Female*
*License Number: 14558*
*NPI: 1972944189*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

*1/2 mile from Site): 1T*

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

**MORRISON REYES, JOSHUA, MD**

*Provider Gender: Male*

*License Number: A125435*

*NPI: 1235366782*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Indonesian, Spanish*

*Cultural Competency: Y*

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

*Phone: (619) 465-2020*

*Fax: (619) 698-1189*

*After Hours Phone: (619) 465-2020*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

**NGUYEN, THY, OD**

*Provider Gender: Female*

*License Number: 12746*

*NPI: 1750490413*

*Provider English Spoken: Y*

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

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619) 722-8460*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

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

**OU, JOCELYN, OD**

*Provider Gender: Female*

*License Number: 34063*

*NPI: 1225518996*

*Provider English Spoken: Y*

*Cultural Competency: Y*

ALVARADO EYE ASSOCIATES MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

*Phone: (619) 460-3711*

*Fax: (619) 460-2184*

*After Hours Phone: (619) 460-3711*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

**PANDYA, BHUMIKA, OD**

*Provider Gender: Female*

*License Number: 35025*

*NPI: 1063182822*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Hindi*

*Cultural Competency: Y*

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

*Phone: (619) 722-8460*

*Fax: (619) 722-8465*

*After Hours Phone: (619)*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PATEL, GITANE, MD**
*Provider Gender: Male*
*License Number: A108603*
*NPI: 1710171434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*

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# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**QUACH, PHUC, OD**
*Provider Gender: Male*
*License Number: 12891*
*NPI: 1770617805*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**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*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TONNU, ANH, OD**
*Provider Gender: Female*
*License Number: 11318*
*NPI: 1679521280*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**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): 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*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**TU, BEVERLY, OD**
*Provider Gender: Female*
*License Number: 34108*
*NPI: 1053892794*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
*Phone: (619) 465-2020*
*Fax: (619) 698-1189*
*After Hours Phone: (619) 465-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**WONG, SHARON, OD**
*Provider Gender: Female*
*License Number: 15137*
*NPI: 1497159552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
*Phone: (619) 722-8460*
*Fax: (619) 722-8465*
*After Hours Phone: (619) 722-8460*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**YOUNG, ALLA, OD**
*Provider Gender: Female*
*License Number: 34191*
*NPI: 1285085142*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Russian*
*Cultural Competency: Y*
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
*Phone: (619) 460-3711*
*Fax: (619) 460-2184*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*
*Cultural Competency: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

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*

## 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 1/2 mile from Site): 1U*
*Hours: M-TH 9AM-5PM F 9AM-4PM*

## NATIONAL CITY

**AOTO, KIM, OD**
*Provider Gender: Female*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**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): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**DEAN, MOENA, OD**
*Provider Gender: Female*
*License Number: 33955*
*NPI: 1265927578*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**DYER, SHARON, OD**
*Provider Gender: Female*
*License Number: 33450*
*NPI: 1063866887*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**GOLLOGLY, HEIDRUN, MD**
*Provider Gender: Female*
*License Number: A134761*
*NPI: 1477879823*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, French, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*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*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**KALRA, ANKUR, OD**
*Provider Gender: Male*
*License Number: 11898*
*NPI: 1124195789*
*Provider English Spoken: Y*
*Provider Language(s) Spoken:*

*Hindi*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KEDDINGTON, JOAN, OD**
*Provider Gender: Female*
*License Number: 6263*
*NPI: 1992872691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
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):*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
ACUITY EYE GROUP
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*

**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*

**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*

**KING, MARY, OD**
*Provider Gender: Female*
*License Number: 13711*
*NPI: 1578792107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**LEE, AUSTIN, OD**
*Provider Gender: Male*
*License Number: 14519*
*NPI: 1922356914*
*Provider English Spoken: Y*
*Cultural Competency: Y*
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 477-2771*
*Fax: (619) 477-1680*
*After Hours Phone: (619) 477-2771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TU 10AM-5PM*
*W-F 9:30AM-5PM*

**LEE, SALLY, DO**
*Provider Gender: Female*
*License Number: 20A8088*
*NPI: 1457468514*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
SAN DIEGO EYE PROFESSIONALS
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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**MARYOUNG, ALLISON, OD**
*Provider Gender: Female*
*License Number: 35512*
*NPI: 1083309124*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

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

**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*

**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*

**MENDOZA, RAYMUNDO, OD**
*Provider Gender: Male*
*License Number: 8150*
*NPI: 1306837760*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 475-2184*
*Fax: (619) 475-3917*
*After Hours Phone: (619) 475-2184*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TU 10AM-5PM*
*TH-F 10AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**NGUYEN, THERESA, OD**
*Provider Gender: Female*
*License Number: 35530TLG*
*NPI: 1609555713*
*Provider English Spoken: Y*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: SU 10AM-4PM*
*M-F 9AM-6PM*
*SA 9AM-5PM*

**PATEL, 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*

**PATEL, SARJAN, MD**
*Provider Gender: Male*
*License Number: A114976*
*NPI: 1316199326*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*
*Cultural Competency: Y*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**PRABHU, SUJATA, MD**
*Provider Gender: Female*
*License Number: A115965*
*NPI: 1982872552*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**SCOTT, JEFFREY, OD**
*Provider Gender: Male*
*License Number: 34978*
*NPI: 1568813434*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TO, BRITTANY, OD**
*Provider Gender: Female*
*License Number: 10651*
*NPI: 1306997143*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**TOUBIA, ELIAS, OD**
*Provider Gender: Male*
*License Number: 33758*
*NPI: 1740701481*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
LUSTRO EYEWORKS OPTOMETRY
1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
*Phone: (619) 477-2159*
*Fax: (619) 477-2128*
*After Hours Phone: (619) 477-2159*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Arabic, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**VINH, JOHN, OD**
*Provider Gender: Male*
*License Number: 14177*
*NPI: 1003102724*
*Provider English Spoken: Y*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: 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*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

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# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Phone: (619) 470-2700*
*Fax: (619) 267-8221*
*After Hours Phone: (619) 470-2700*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-4:30PM*

**WU, EVA, OD**
*Provider Gender: Female*
*License Number: 14743*
*NPI: 1073954442*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 477-2771*
*Fax: (619) 477-1680*
*After Hours Phone: (619) 477-2771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TU 10AM-5PM*
*W-F 9:30AM-5PM*

**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*

**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*

**ZVANUT, DONALD, OD**
*Provider Gender: Male*
*License Number: 8642*
*NPI: 1336211804*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Cultural Competency: Y*
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
*Phone: (619) 472-1010*
*Fax: (619) 479-5233*
*After Hours Phone: (619) 472-1010*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 8AM-6PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-5PM*

## OCEANSIDE

**KASAI, SARAH, OD**
*Provider Gender: Female*
*License Number: 34226*
*NPI: 1023406238*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
*Phone: (760) 757-8771*
*After Hours Phone: (760) 757-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 10AM-7PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**NISKANEN, RACHEL, OD**
*Provider Gender: Female*
*License Number: 34663*
*NPI: 1467065797*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
*Phone: (760) 757-8771*
*After Hours Phone: (760) 757-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 10AM-7PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**ROSA, ADAM, OD**
*Provider Gender: Male*
*License Number: 34093*
*NPI: 1295250264*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058
*Phone: (760) 757-8771*
*After Hours Phone: (760) 757-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*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*
*Provider Language(s) Spoken: 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*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: 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 Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU-TH 9AM-6PM*
*F 8AM-5PM*

**ADAMS, MONA, OD**
*Provider Gender: Female*
*License Number: 14457*
*NPI: 1942564521*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**AOTO, KIM, OD**
*Provider Gender: Female*
*License Number: 14524*
*NPI: 1780935650*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**ARCHIBALD, JOHN, OD**
*Provider Gender: Male*
*License Number: 11813*
*NPI: 1902893357*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYELUX OPTOMETRY
16615 DOVE CANYON RD STE 105
SAN DIEGO, CA 92127
*Phone: (858) 487-7900*
*Fax: (858) 487-1896*
*After Hours Phone: (858) 487-7900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-2PM*

**BANSAL, PREETI, MD**
*Provider Gender: Female*
*License Number: A90890*
*NPI: 1871664631*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**BAUMANN, DANIELA, OD**
*Provider Gender: Female*
*License Number: 34530*
*NPI: 1982232146*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*

**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*

**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*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**BHATIA, SHAGUN, MD**
*Provider Gender: Female*
*License Number: A154902*
*NPI: 1104237353*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**BINDER, NICHOLAS, MD**
*Provider Gender: Male*
*License Number: A124698*
*NPI: 1306076716*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
VAN HOOSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111
*Phone: (858) 292-7193*
*Fax: (858) 292-8247*
*After Hours Phone: (858) 292-7193*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 8AM-5PM*
*TU-TH 9AM-6PM*
*F 8AM-5PM*

**CAO, STEPHANIE, OD**
*Provider Gender: Female*
*License Number: 35158*
*NPI: 1215660436*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
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*

**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
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*

**CHAIN, PEI CHI, OD**
*Provider Gender: Female*
*License Number: 34439*
*NPI: 1730676727*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
SPOTLIGHT OPTOMETRY
7835 HIGHLANDS VLG PL D 106

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

SAN DIEGO, CA 92129
*Phone: (858) 250-0052*
*Fax: (858) 788-0287*
*After Hours Phone: (858) 250-0052*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-5PM*
*W 10AM-6PM*
*F 9AM-5PM*
*SA 9AM-1PM*

**CHEN, LESLIE, OD**
*Provider Gender: Female*
*License Number: 12792*
*NPI: 1508953332*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Chinese*
*Cultural Competency: Y*
EYE STUDIO OPTOMETRY
4475 UNIVERSITY AVE
SAN DIEGO, CA 92105
*Phone: (619) 521-2020*
*Fax: (619) 521-2025*
*After Hours Phone: (619) 521-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 9AM-5PM*
*TH 9AM-1:30PM*
*F 9AM-5PM*
*SA 9AM-1PM*

**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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

**DAVIS, JADE, OD**
*Provider Gender: Female*
*License Number: 11765*
*NPI: 1457303398*
*Provider English Spoken: Y*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM SA 9AM-3PM*

**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*

**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, 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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

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

**DUONG, KIM, OD**

*Provider Gender: Female*

*License Number: 34222*

*NPI: 1114448651*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: Y*

RADY CHILDRENS SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

*Phone: (858) 309-7702*

*Fax: (858) 966-8901*

*After Hours Phone: (858) 309-7702*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 7AM-5PM*

**DYER, SHARON, OD**

*Provider Gender: Female*

*License Number: 33450*

*NPI: 1063866887*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WEST COAST EYE CARE

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, HOANG, OD**
*Provider Gender: Male*
*License Number: 12582*
*NPI: 1275684847*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HEALTHY I CARE OPTOMETRY
10737 CAMINO RUIZ STE 220
SAN DIEGO, CA 92126
*Phone: (619) 590-1994*
*After Hours Phone: (619) 590-1994*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: TH-F 9AM-5PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**HO, AMIEE, OD**
*Provider Gender: Female*
*License Number: 14527*
*NPI: 1396009478*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HOANG, KEVIN, OD**
*Provider Gender: Male*
*License Number: 34401*
*NPI: 1790339216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*

*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**HOFFMAN, STEVEN, OD**
*Provider Gender: Male*
*License Number: 34561*
*NPI: 1033736079*
*Provider English Spoken: Y*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**HOM, GREGORY, OD**
*Provider Gender: Male*
*License Number: 9694*
*NPI: 1154473916*
*Provider English Spoken: Y*
*Cultural Competency: Y*
GREGORY G HOM OD
11230 SORRENTO VLY RD STE 145
SAN DIEGO, CA 92121
*Phone: (858) 535-9835*
*Fax: (858) 535-1266*
*After Hours Phone: (858) 535-9835*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TH 9AM-5PM F 9AM-4PM*

**HOO, PAMELA, OD**
*Provider Gender: Female*
*License Number: 11033*
*NPI: 1275566010*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*

**HUANG, GRACE, OD**
*Provider Gender: Female*
*License Number: 35485*
*NPI: 1013605526*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**HUDSON, HENRY, MD**
*Provider Gender: Male*
*License Number: G76091*
*NPI: 1851349195*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**HUSTANA, LARA, OD**
*Provider Gender: Female*
*License Number: 11472*
*NPI: 1235161597*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**HUYNH, LOAN, OD**
*Provider Gender: Female*
*License Number: 34472*
*NPI: 1003454604*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD
STE 1313
SAN DIEGO, CA 92128
*Phone: (858) 674-1276*
*Fax: (858) 674-5863*
*After Hours Phone: (858) 674-1276*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-4PM*
*TU 7AM-1PM*
*W-TH 10AM-6PM*
*F 10AM-3PM*
*SA 9AM-2PM*

**HUYNH, CHI, OD**
*Provider Gender: Female*
*License Number: 12901*
*NPI: 1922187426*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
CRYSTAL EYESITE OPTOMETRY
9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126
*Phone: (858) 547-3988*
*Fax: (844) 367-5161*
*After Hours Phone: (858) 547-3988*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 9:30AM-6PM*
*W 9:30AM-6PM*
*TH-F 10AM-6PM*
*SA 9AM-3PM*

**HUYNH, PAUL, MD**
*Provider Gender: Male*
*License Number: A79141*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ADVANCED EYE AND LASER CTR OF CA INC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
*Phone: (858) 549-3200*
*Fax: (858) 549-3207*
*After Hours Phone: (858) 549-3200*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**HUYNH, PAUL, MD**
*Provider Gender: Male*
*License Number: A79141*
*NPI: 1871577056*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
ADVANCED EYE AND LASER CTR OF CA INC

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 283-1303*
*Fax: (619) 283-1666*
*After Hours Phone: (619) 283-1303*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**JOMOC, CAITLIN, OD**
*Provider Gender: Female*
*License Number: 35009*
*NPI: 1861164642*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
*Phone: (858) 534-6290*
*Fax: (858) 732-0921*
*After Hours Phone: (858) 534-6290*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-5PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KALBAKJI, NATALY, OD**
*Provider Gender: Female*
*License Number: 34943*
*NPI: 1700556438*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*Provider Language(s) Spoken: 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*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KATZMAN, BARRY, MD**
*Provider Gender: Male*
*License Number: A34834*
*NPI: 1760473797*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KHALIL, VADY, OD**
*Provider Gender: Male*
*License Number: 35137*
*NPI: 1275263584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*

**KHAN, FAHAD, MD**
*Provider Gender: Male*
*License Number: A163142*
*NPI: 1548605843*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
VISION SPECIALISTS OF CALIFORNIA
233 LEWIS ST
SAN DIEGO, CA 92103
*Phone: (619) 501-9050*
*Fax: (619) 501-9054*
*After Hours Phone: (619) 501-9050*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Bengali, Hindi, Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 8AM-5PM*
*F 8AM-4PM*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*

**KHIEU, TINA, OD**
*Provider Gender: Female*
*License Number: 34777*
*NPI: 1962031617*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**KHINDA, SUNEHA, OD**
*Provider Gender: Female*
*License Number: 35494*
*NPI: 1750066726*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
*Phone: (858) 487-7900*
*Fax: (858) 487-1896*
*After Hours Phone: (858) 487-7900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 8AM-5PM*
*SA 8:30AM-2PM*

**KIM, PHILIP, OD**
*Provider Gender: Male*
*License Number: 33893*
*NPI: 1376929034*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

**KLAREN, AMANDA, OD**
*Provider Gender: Female*
*License Number: 12617*
*NPI: 1396876611*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**KULISCHAK, JOHN, OD**
*Provider Gender: Male*
*License Number: 9279*
*NPI: 1740205236*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**LAM, ANNE, OD**
*Provider Gender: Female*
*License Number: 12810*
*NPI: 1174550768*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**LARSEN, STEVEN, OD**
*Provider Gender: Male*
*License Number: 7687*
*NPI: 1629194782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*SA 10AM-2PM*

**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*

**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*
*SA 9AM-3PM*

**LAU, JANICE, OD**
*Provider Gender: Female*
*License Number: 13037*
*NPI: 1952453300*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SABRE SPRINGS OPTOMETRY
12650 SABRE SPGS PKWY STE 203
SAN DIEGO, CA 92128
*Phone: (858) 748-1265*
*Fax: (844) 269-9527*
*After Hours Phone: (858) 748-1265*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender*

*restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TU 9AM-5PM*
*W 10AM-6PM*
*TH 9AM-5PM*
*F 10AM-6PM*

**LEE, JASON, OD**
*Provider Gender: Male*
*License Number: 14881*
*NPI: 1679985584*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**LIN, HENRY, OD**
*Provider Gender: Male*
*License Number: 11368*
*NPI: 1861405664*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM*
*SA 9AM-3PM*

**LIN, HENRY, OD**
*Provider Gender: Male*
*License Number: 11368*
*NPI: 1861405664*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
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*

**LIN, HENRY, OD**
*Provider Gender: Male*
*License Number: 11368*
*NPI: 1861405664*
*Provider English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
*Phone: (619) 297-2020*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 297-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9:30AM-6PM*
*SA 9AM-3PM*

**LLANES, BENJAMIN, OD**
*Provider Gender: Male*
*License Number: 8782*
*NPI: 1053309005*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Tagalog*
*Cultural Competency: Y*
SEE KLEER EYECARE CENTER
9580 BLACK MOUNTAIN RD STE J
SAN DIEGO, CA 92126
*Phone: (858) 536-8952*
*Fax: (858) 536-8951*
*After Hours Phone: (858) 536-8952*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 11AM-6PM*
*F 1PM-5PM*
*SA 9AM-1PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD STE F
SAN DIEGO, CA 92124
*Phone: (858) 279-6500*
*Fax: (858) 225-7174*
*After Hours Phone: (858) 279-6500*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 9AM-6PM*
*TH-F 9AM-5PM*
*SA 8AM-3PM*

**MARR, RYAN, OD**
*Provider Gender: Male*
*License Number: 35302*
*NPI: 1235857525*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
*Phone: (619) 508-5678*
*Fax: (619) 501-0686*
*After Hours Phone: (619) 508-5678*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Korean, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

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

**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*

**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
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*

**MARYOUNG, ALLISON, OD**

*Provider Gender: Female*

*License Number: 35512*

*NPI: 1083309124*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 10AM-6PM*
*TU 8:30AM-5PM*
*W 7:30AM-4PM*
*TH 9:30AM-5PM*
*F 8AM-4PM*

**MARYOUNG, ALLISON, OD**

*Provider Gender: Female*

*License Number: 35512*

*NPI: 1083309124*

*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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**MCCLEAN, ESMERALDA, OD**
*Provider Gender: Female*
*License Number: 15001*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
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*

**MCCLEAN, ESMERALDA, OD**
*Provider Gender: Female*
*License Number: 15001*
*NPI: 1962817981*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*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*

**MCGRAW, JOSEPH, MD**
*Provider Gender: Male*
*License Number: A155228*
*NPI: 1588624852*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**MIZOGUCHI, LIANNE, OD**
*Provider Gender: Female*
*License Number: 10104*
*NPI: 1619900313*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**MOLL, ANGELA, MD**
*Provider Gender: Female*
*License Number: A105472*
*NPI: 1861648602*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**MOOR, TRACY, OD**
*Provider Gender: Female*
*License Number: 35085*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
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*
*NPI: 1184283277*
*Provider English Spoken: Y*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

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*
*Provider Language(s) Spoken: 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*

**MORRISON REYES, JOSHUA, MD**
*Provider Gender: Male*
*License Number: A125435*
*NPI: 1235366782*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Indonesian, Spanish*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**NGUYEN, KELVIN, OD**
*Provider Gender: Male*
*License Number: 11085*
*NPI: 1518923572*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
*Phone: (619) 508-5678*
*Fax: (619) 501-0686*
*After Hours Phone: (619) 508-5678*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Korean, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-5:30PM*

**NGUYEN, BRUCE, OD**
*Provider Gender: Male*
*License Number: 14156*
*NPI: 1376839019*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
SD VISION CARE OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105
*Phone: (619) 508-5678*
*Fax: (619) 501-0686*
*After Hours Phone: (619) 508-5678*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Korean, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8:30AM-5:30PM*

**NGUYEN, BRUCE, OD**
*Provider Gender: Male*
*License Number: 14156*
*NPI: 1376839019*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD STE F
SAN DIEGO, CA 92124
*Phone: (858) 279-6500*
*Fax: (858) 225-7174*
*After Hours Phone: (858) 279-6500*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-W 9AM-6PM TH-F 9AM-5PM SA 8AM-3PM*

**NGUYEN, JASMINE, OD**
*Provider Gender: Female*
*License Number: 11189*
*NPI: 1497896922*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM SA 9AM-1PM*

**NGUYEN, THANH, OD**
*Provider Gender: Female*
*License Number: 13126*
*NPI: 1992813323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken:*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**NGUYEN, VIET, OD**
*Provider Gender: Male*
*License Number: 35481*
*NPI: 1861170573*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**NGUYEN, THANH, OD**
*Provider Gender: Female*
*License Number: 13126*
*NPI: 1992813323*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
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*

**O HALLORAN, HENRY, MD**
*Provider Gender: Male*
*License Number: A73282*
*NPI: 1235287947*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: German, Spanish*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*

*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**PATEL, SARJAN, MD**

*Provider Gender: Male*

*License Number: A114976*

*NPI: 1316199326*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Gujarati, Hindi, Spanish*

*Cultural Competency: Y*

WEST COAST EYE CARE

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*

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

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*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*

**PHAM, TONY, OD**
*Provider Gender: Male*
*License Number: 12348*
*NPI: 1841271434*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Vietnamese*
*Cultural Competency: Y*
MIRA MESA EYECARE
6755 MIRA MESA BLVD STE 141
SAN DIEGO, CA 92121
*Phone: (858) 535-8282*
*Fax: (858) 535-0537*
*After Hours Phone: (858) 535-8282*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9:30AM-6PM*
*TH-F 9:30AM-6PM*

**PHUNG, RICHARD N V, OD**
*Provider Gender: Male*
*License Number: 9547*
*NPI: 1689661571*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese, Chinese*
*Cultural Competency: Y*
SCRIPPS RANCH OPTOMETRI CTR
9880 HIBERT ST STE E1
SAN DIEGO, CA 92131
*Phone: (858) 693-9044*
*Fax: (858) 693-0704*
*After Hours Phone: (858) 693-9044*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 10AM-6PM*
*TU 10AM-2PM*
*W-TH 10AM-6PM*
*F 9AM-2PM*
*SA 9AM-2PM*

**POUSTI, SHEIVA, OD**
*Provider Gender: Female*
*License Number: 10403*
*NPI: 1730240052*
*Provider English Spoken: Y*
*Cultural Competency: Y*
SAN DIEGO EYE CLINIC OPTOMETRY
3560 FAIRMOUNT AVE STE A
SAN DIEGO, CA 92105
*Phone: (619) 431-2020*
*Fax: (619) 376-2100*
*After Hours Phone: (619) 431-2020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL):*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: SU-SA 9AM-6PM*

**PRABHU, SUJATA, MD**

*Provider Gender: Female*

*License Number: A115965*

*NPI: 1982872552*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

WEST COAST EYE CARE

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*

**PRABHU, SUJATA, MD**

*Provider Gender: Female*

*License Number: A115965*

*NPI: 1982872552*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**SANDOC, EMILY, OD**

*Provider Gender: Female*

*License Number: 13535*

*NPI: 1992969794*

*Provider English Spoken: Y*

*Cultural Competency: Y*

OPTOM-EYES VISION CARE OPTOMETRY

5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108

*Phone: (619) 295-2900*

*Fax: (888) 210-5799*

*After Hours Phone: (619) 295-2900*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M-F 9AM-5:30PM*
*SA 9AM-3PM*

**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

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# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

SAN DIEGO, CA 92128
*Phone: (858) 674-1276*
*Fax: (858) 674-5863*
*After Hours Phone: (858) 674-1276*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Tagalog*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-4PM*
*TU 7AM-1PM*
*W-TH 10AM-6PM*
*F 10AM-3PM*
*SA 9AM-2PM*

**TA, TRANG, OD**
*Provider Gender: Female*
*License Number: 12100*
*NPI: 1518381045*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
*Phone: (619) 284-3937*
*Fax: (619) 284-3938*
*After Hours Phone: (619) 284-3937*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**TAM, MAY, OD**
*Provider Gender: Female*
*License Number: 11960*
*NPI: 1548255896*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
*Phone: (619) 295-2900*
*Fax: (888) 210-5799*
*After Hours Phone: (619) 295-2900*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-5:30PM*
*SA 9AM-3PM*

**TAM, MAY, OD**
*Provider Gender: Female*
*License Number: 11960*
*NPI: 1548255896*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
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*

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*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*

**TAM, MAY, OD**

*Provider Gender: Female*

*License Number: 11960*

*NPI: 1548255896*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Spanish*

*Cultural Competency: Y*

OPTOM-EYES VISION CARE OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

*Phone: (619) 297-2020*

*Fax: (888) 210-5799*

*After Hours Phone: (619) 297-2020*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 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*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

*Hours: M-F 9AM-5PM*
*SA 9AM-1PM*

**TO, BRITTANY, OD**

*Provider Gender: Female*

*License Number: 10651*

*NPI: 1306997143*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: Y*

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

*Phone: (619) 697-4600*

*Fax: (619) 697-2410*

*After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**TO, BRITTANY, OD**

*Provider Gender: Female*

*License Number: 10651*

*NPI: 1306997143*

*Provider English Spoken: Y*

*Provider Language(s) Spoken: Vietnamese*

*Cultural Competency: Y*

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

*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*

**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*

**TON-NU, MY LINH, OD**
*Provider Gender: Female*
*License Number: 34990*
*NPI: 1245733476*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 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*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

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# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*F 8AM-4PM*

**TONNU, ANH, OD**
*Provider Gender: Female*
*License Number: 11318*
*NPI: 1679521280*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*

**TRAN, ALEXANDER, OD**
*Provider Gender: Male*
*License Number: 14136*
*NPI: 1902414790*
*Provider English Spoken: Y*
*Cultural Competency: Y*
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
*Phone: (858) 309-7702*
*Fax: (858) 966-8901*
*After Hours Phone: (858) 309-7702*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 7AM-5PM*

**TRANG, CHAU, OD**
*Provider Gender: Female*
*License Number: 9556*
*NPI: 1073671087*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: French, Spanish, Vietnamese, Chinese*
*Cultural Competency: Y*
CHAU H TRANG OD
6947 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
*Phone: (858) 495-0592*
*Fax: (858) 495-0560*
*After Hours Phone: (858) 495-0592*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: French, Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 10AM-3PM*
*W 10AM-3PM*
*F 10AM-5PM*
*SA 9AM-1PM*

**VAN HOOSE, MARC, OD**
*Provider Gender: Male*
*License Number: 12667*
*NPI: 1932280054*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
VAN HOOSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*

**VIVIRITO, MARY, OD**
*Provider Gender: Female*
*License Number: 33798*
*NPI: 1477968667*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: 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*

**VO, ANDREW MINH, OD**
*Provider Gender: Male*
*License Number: 33869*
*NPI: 1790291565*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**WONG, GORDON, OD**
*Provider Gender: Male*
*License Number: 9832*
*NPI: 1447338447*
*Provider English Spoken: Y*
*Cultural Competency: Y*
UPTOWN OPTOMETRY
4096 PARK BLVD
SAN DIEGO, CA 92103
*Phone: (619) 291-5505*
*Fax: (619) 291-4404*
*After Hours Phone: (619) 291-5505*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\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*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

**YU, CAROL, OD**
*Provider Gender: Female*
*License Number: 34047*
*NPI: 1639697451*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
*Phone: (619) 543-6244*
*Fax: (619) 295-5034*
*After Hours Phone: (619) 543-6244*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-F 8AM-4PM*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
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*

**ZAIDI, NOORINA, OD**
*Provider Gender: Female*
*License Number: 35615*
*NPI: 1023477262*
*Provider English Spoken: Y*
*Cultural Competency: Y*
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
*Phone: (619) 697-4600*
*Fax: (619) 697-2410*
*After Hours Phone: (619) 697-4600*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M 7:30AM-4:30PM*
*TU 8AM-5PM*
*W 8:30AM-5PM*
*TH 8AM-6PM*
*F 8AM-4PM*

**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*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RSF OPHTHALMOLOGY
100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
*Phone: (760) 598-0400*
*Fax: (760) 249-7394*
*After Hours Phone: (760) 598-0400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, 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*
*Provider Language(s) Spoken: Spanish, Chinese*
*Cultural Competency: Y*
RSF OPHTHALMOLOGY
100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
*Phone: (760) 598-0400*
*Fax: (760) 249-7394*
*After Hours Phone: (760) 598-0400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, 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*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
RSF OPHTHALMOLOGY
100 N RANCHO SNTA FE RD STE 12
SAN MARCOS, CA 92069
*Phone: (760) 598-0400*
*Fax: (760) 249-7394*
*After Hours Phone: (760) 598-0400*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, 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

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# J. Direktoryo ng Provider sa Paningin – Mga Serbisyo sa Mata at Paningin

SAN MARCOS, CA 92078
*Phone: (760) 727-2211*
*Fax: (760) 727-2533*
*After Hours Phone: (760) 727-2211*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-3PM*

**TA, MINI, OD**
*Provider Gender: Female*
*License Number: 15170*
*NPI: 1578955605*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
*Phone: (760) 736-0020*
*Fax: (760) 736-0019*
*After Hours Phone: (760) 736-0020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**THAI, AMANDA, OD**
*Provider Gender: Female*
*License Number: 34861*
*NPI: 1457928558*
*Provider English Spoken: Y*
*Cultural Competency: Y*
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
*Phone: (760) 736-0020*
*Fax: (760) 736-0019*
*After Hours Phone: (760) 736-0020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU 9AM-6PM*
*W 9AM-5PM*
*TH 9AM-6PM*
*F 9AM-5PM*

**TRAN, MICHAEL, OD**
*Provider Gender: Male*
*License Number: 14530*
*NPI: 1649524216*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078
*Phone: (760) 736-0020*
*Fax: (760) 736-0019*
*After Hours Phone: (760) 736-0020*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish, Vietnamese*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

*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*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*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*
*Provider Language(s) Spoken: Hindi*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

# J. Direktoryo ng Provider sa Paningin - Mga Serbisyo sa Mata at Paningin

*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**KEDDINGTON, JOAN, OD**
*Provider Gender: Female*
*License Number: 6263*
*NPI: 1992872691*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**KING, MARY, OD**
*Provider Gender: Female*
*License Number: 13711*
*NPI: 1578792107*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**NGUYEN, THERESA, OD**
*Provider Gender: Female*
*License Number: 35530TLG*
*NPI: 1609555713*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM SA 9AM-5PM*

**SOLIS, KEVIN, OD**
*Provider Gender: Male*
*License Number: 10420*

*NPI: 1538362116*
*Provider English Spoken: Y*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM*
*SA 9AM-5PM*

**TOUBIA, ELIAS, OD**
*Provider Gender: Male*
*License Number: 33758*
*NPI: 1740701481*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Arabic*
*Cultural Competency: Y*
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA 91977
*Phone: (619) 466-9444*
*Fax: (619) 466-9314*
*After Hours Phone: (619) 466-9444*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-F 9AM-6PM*
*SA 9AM-5PM*

## VALLEY CENTER

**JOYCE, ROBERT, OD**
*Provider Gender: Male*
*License Number: 11833*
*NPI: 1275585127*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082
*Phone: (760) 751-8771*
*Fax: (760) 751-8772*
*After Hours Phone: (760) 751-8771*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1U*
*Hours: M-TH 9AM-5PM*
*F 9AM-1PM*

## VISTA

**DEMLINGER, GLENN, OD**
*Provider Gender: Male*
*License Number: 8954*
*NPI: 1508932518*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
SHADOWRIDGE FAMILY VISION
741 SHADOWRIDGE DR
VISTA, CA 92083
*Phone: (760) 727-1844*
*Fax: (760) 727-3044*
*After Hours Phone: (760) 727-1844*
*Accepting New Patients: Yes*
*Site English Spoken: Y*

*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TU 9AM-6PM*
*W 7AM-5PM*
*TH 9AM-6PM*

**GEORGE, KENDALL, OD**
*Provider Gender: Male*
*License Number: 34270*
*NPI: 1619529948*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
*Phone: (760) 758-2340*
*Fax: (760) 867-2222*
*After Hours Phone: (760) 758-2340*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU-W 9AM-6PM*
*TH-F 9AM-5PM*

**GEORGE, BRUCE, OD**
*Provider Gender: Male*
*License Number: 7696*
*NPI: 1356414551*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Korean, Spanish*
*Cultural Competency: Y*
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
*Phone: (760) 758-2340*
*Fax: (760) 867-2222*
*After Hours Phone: (760) 758-2340*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Site Languages(s) Spoken: Spanish*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M 9AM-5PM*
*TU-W 9AM-6PM*
*TH-F 9AM-5PM*

**TRAN, THAO, OD**
*Provider Gender: Female*
*License Number: 12867*
*NPI: 1962581421*
*Provider English Spoken: Y*
*Provider Language(s) Spoken: Vietnamese*
*Cultural Competency: Y*
KINDERSPECS-GOOD EYES OPTOMETRY
110 CIVIC CENTER DR STE 204
VISTA, CA 92084
*Phone: (760) 753-3665*
*Fax: (408) 969-1653*
*After Hours Phone: (760) 753-3665*
*Accepting New Patients: Yes*
*Site English Spoken: Y*
*Min/Max Age: 0\None*
*Gender Restriction: No Gender restriction*
*American Sign Language (ASL): N*
*Accessibility: CONTACT PROVIDER*
*Public transportation (within 1/2 mile from Site): 1T*
*Hours: M-TH 10AM-5PM*

## K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

Talahanayan ng ECM na Pagtutuunan ng Pansin

| | | Populasyon na Pagtutuunan ng Pansin ng ECM | Matanda | Mga Bata at Kabataan |
|---|---|---|---|---|
|  | 1 | Mga Indibidwal na Nakakaranas ng Kawalan ng Tahanan | ✓ | ✓ |
|  | 2 | Mga Indibidwal na Nanganganib para sa Maiiwasang Paggamit ng Ospital o ED *(pormal na tinatawag na "Mga Madalas na Gumagamit")* | ✓ | ✓ |
|  | 3 | Mga Indibidwal na may Malubhang Kalusugan sa Isip at/o Mga Pangangailangan sa Sakit dahil sa Paggamit ng Droga o Pag-inom ng Alak | ✓ | ✓ |
|  | 4 | Mga Indibidwal na Lumilipat mula sa Pagkakulong | ✓ | ✓ |
|  | 5 | Mga Matanda na Naninirahan sa Komunidad at Nanganganib para sa Ilagay sa Pangmatagalang Pangangalaga (Long-term Care, LTC) | ✓ | |
|  | 6 | Mga Residente ng Nursing Facility para sa Matanda na Lumilipat sa Komunidad | ✓ | |
|  | 7 | Mga Bata at Kabataan na Naka_enroll sa California Children's Services (CCS) o CCS Whole Child Model (WCM) na may Karagdagang Pangangailangan na Higit sa Kondisyon na ayon sa CCS | | ✓ |
|  | 8 | Mga Bata at Kabataang Kabilang sa Child Welfare | | ✓ |
|  | 9 | Pagtutuunan ng Pansin na Pagkakapantay-pantay sa Kapanganakan | ✓ | ✓ |

# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

## CORONA

### TANGELO

1701 N DELILAH ST
CORONA, CA 92879
*Phone: (904) 671-2995*
*After Hours Phone: (904) 671-2995*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: CHRIS.OCONNOR@JOINTANGELO.COM*
*Phone for New Referrals and Existing Patients: (904) 671-2995*

## CULVER CITY

### MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE
STE 465
CULVER CITY, CA 90230
*Phone: (323) 203-0070*
*After Hours Phone: (323) 203-0070*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*




*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@mymedzed.com*
*Phone for New Referrals and Existing Patients: (323) 203-0070*

### MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE
STE 465
CULVER CITY, CA 90230
*Phone: (323) 203-0070*
*After Hours Phone: (323) 203-0070*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*




*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@mymedzed.com*
*Phone for New Referrals and Existing Patients: (323) 203-0070*

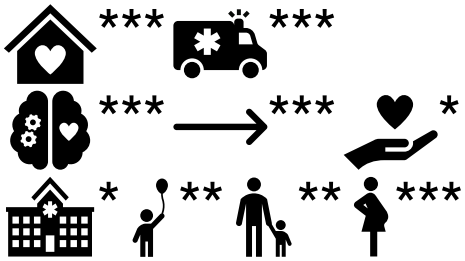
## EL CAJON

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
Ang Street Medicine, o street health, ay ang kasanayan ng pagdadala ng pangangalagang pangkalusugan sa mga taong nakakaranas ng walang masisilungan dahil walang tirahan Makipag-ugnayan sa Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 am hanggang 6:00 pm TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medic-cal. Ang impormasyon sa direktoryo ng provider na ito ay maaaring magbago.

# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

### LA MAESTRA COMMUNITY HEALTH CENTERS

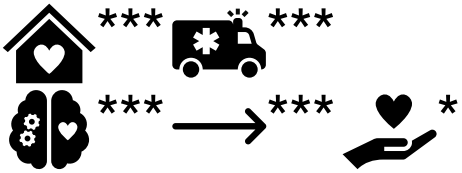
165 S 1ST ST
EL CAJON, CA 92019
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*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*

## EL SEGUNDO

### 24HR HOMECARE LLC

200 N PACIFIC COAST

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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Makipag-ugnayan sa Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 am hanggang 6:00 pm TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medic-cal. Ang impormasyon sa direktoryo ng provider na ito ay maaaring magbago.

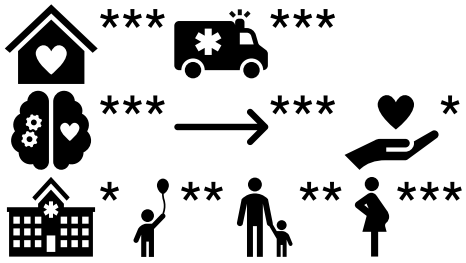
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

HWY STE 300
EL SEGUNDO, CA 90245
*Phone: (310) 906-3683*
*After Hours Phone: (310) 906-3683*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (310) 906-3683*

**ENCINITAS**

### SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL
STE B149
ENCINITAS, CA 92024
*Phone: (619) 273-3295*
*After Hours Phone: (619) 273-3295*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: referrals@sdwellnesscollaborative.org*
*Phone for New Referrals and Existing Patients: (619) 273-3295*
*Mailing Address: 1084 N EL CAMINO REAL STE B-149;Encinitas;CA;92024*
*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*

**ESCONDIDO**

### TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
*Phone: (310) 280-5203*
*After Hours Phone: (310) 280-5203*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (310) 280-5203*

### TITANIUM HEALTHCARE

500 LA TERRAZA BLVD
STE 150
ESCONDIDO, CA 92025
*Phone: (310) 280-5203*
*After Hours Phone: (310)*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*280-5203*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (310) 280-5203*

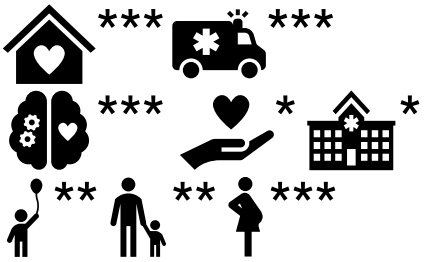
### INTERFAITH COMMUNITY SERVICES

550 W WASHINGTON AVE
ESCONDIDO, CA 92025
*Phone: (760) 489-6380*
*After Hours Phone: (760) 489-6380*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (760) 489-6380*

## IMPERIAL BEACH

### IMPERIAL BEACH HEALTH CENTER

949 PALM AVE
IMPERIAL BEACH, CA 91932
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Accessibility: CONTACT PROVIDER*
*Website: ibclinic.org*
*ECM Population of Focus:*

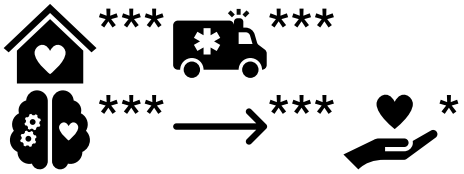


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org*
*Phone for New Referrals and Existing Patients: (619) 429-3733*

## LEMON GROVE

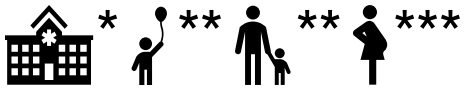
### LA MAESTRA COMMUNITY HEALTH CENTERS

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:*



*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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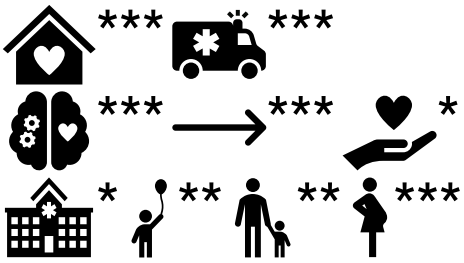
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## LA MAESTRA COMMUNITY HEALTH CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

## SERENE HEALTH

7614 LEMON AVE STE C
LEMON GROVE, CA 91945
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619)*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*354-1409*

### SERENE HEALTH

7614 LEMON AVE STE C
LEMON GROVE, CA 91945
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*

## LOS ANGELES

### EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
*Phone: (323) 276-6471*
*After Hours Phone: (323) 276-6471*
*Hours: M-F 7:30AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 276-6471*

### EXODUS RECOVERY INC

1902 MARENGO ST STE 107
LOS ANGELES, CA 90033
*Phone: (323) 276-6471*
*After Hours Phone: (323) 276-6471*
*Hours: M-F 7:30AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 276-6471*

### EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
*Phone: (323) 789-6492*
*After Hours Phone: (323) 789-6492*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 789-6492*

### EXODUS RECOVERY INC

8401 S VERMONT AVE
LOS ANGELES, CA 90044
*Phone: (323) 789-6492*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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Makipag-ugnayan sa Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 am hanggang 6:00 pm TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medic-cal. Ang impormasyon sa direktoryo ng provider na ito ay maaaring magbago.

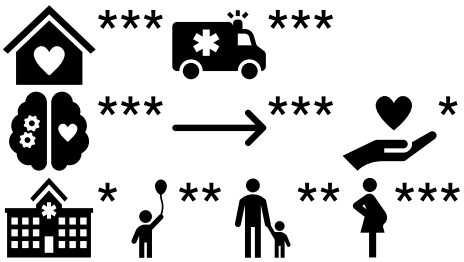
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*After Hours Phone: (323) 789-6492*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (323) 789-6492*

**NATIONAL CITY**

### LA MAESTRA COMMUNITY HEALTH CENTERS

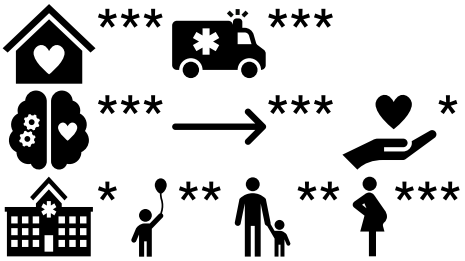
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*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)*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

**ORINDA**

### PATHWAY HOME SOLUTIONS INC

2 BIRCH CT
ORINDA, CA 94563
*Phone: (209) 601-0734*
*After Hours Phone: (209) 601-0734*
*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*

**REDONDO BEACH**

### EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
*Phone: (424) 282-2255*
*After Hours Phone: (424) 282-2255*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (424) 282-2255*

### EXODUS RECOVERY INC

923 S CATALINA AVE
REDONDO BEACH, CA 90277
*Phone: (424) 282-2255*
*After Hours Phone: (424) 282-2255*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (424) 282-2255*

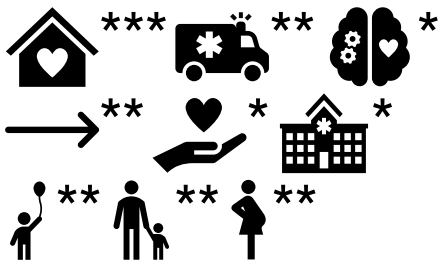
**SACRAMENTO**

### FULL CIRCLE HEALTH NETWORK

2201 K ST
SACRAMENTO, CA 95816
*Phone: (888) 749-8877*
*After Hours Phone: (888) 749-8877*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

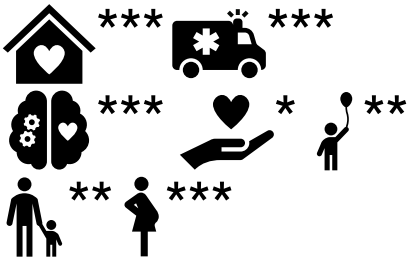


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: network@fullcirclehn.org*
*Phone for New Referrals and Existing Patients: (888) 749-8877*
*Mailing Address: 2201 K ST;SACRAMENTO;CA;95816*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

**SAN DIEGO**

### HEALTHY CONNECT SAN DIEGO

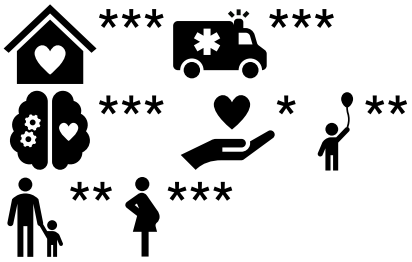
1202 MORENA BLVD
SAN DIEGO, CA 92110
*Phone: (619) 507-9333*
*After Hours Phone: (619) 507-9333*
*Hours: M-F 8AM-4PM*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: mhammel@comresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

### 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*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

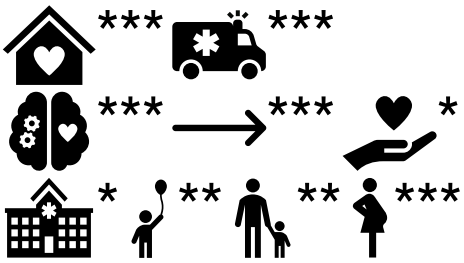
*Email for New Referrals and Existing Patients: mhammel@comresearch.org*
*Phone for New Referrals and Existing Patients: (619) 507-9333*

### FATHER JOES VILLAGES

16 15TH ST
SAN DIEGO, CA 92101
*Phone: (619) 645-6405*
*After Hours Phone: (619) 645-6405*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Recuperative Care (Medical Respite)*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 645-6405*

### FAMILY HEALTH CENTERS OF SAN DIEGO

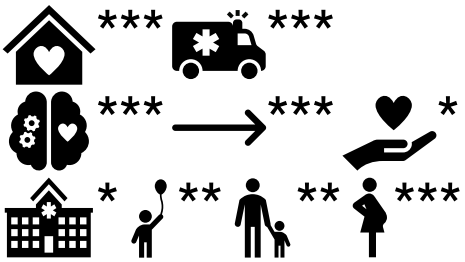
823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
*Phone: (619) 876-4450*
*After Hours Phone: (619) 876-4450*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org*
*Phone for New Referrals and Existing Patients: (619) 876-4450*
*Mailing Address: 823 GATEWAY CENTER WAY;SAN DIEGO;CA;92102*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### 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:*



*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org*
*Phone for New Referrals and Existing Patients: (619) 876-4450*
*Mailing Address: 823 GATEWAY CENTER WAY;SAN DIEGO;CA;92102*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### 2-1-1 SAN DIEGO

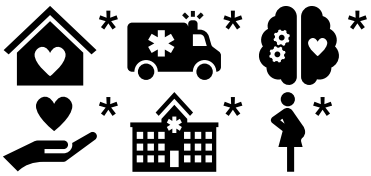
3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
*Phone: (858) 380-5750*
*After Hours Phone: (858) 380-5750*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@211sandiego.org*
*Phone for New Referrals and Existing Patients: (858) 380-5750*

### JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
*Phone: (858) 637-3221*
*After Hours Phone: (858) 637-3221*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



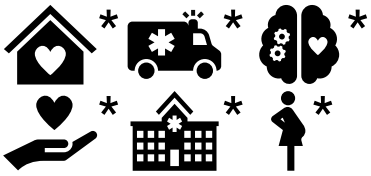
*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: calaim@jfssd.org*
*Phone for New Referrals and Existing Patients: (858) 637-3221*

### JEWISH FAMILY SERVICE OF SAN DIEGO

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

8804 BALBOA AVE
SAN DIEGO, CA 92123
*Phone: (858) 637-3221*
*After Hours Phone: (858) 637-3221*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: calaim@jfssd.org*
*Phone for New Referrals and Existing Patients: (858) 637-3221*

## IMPERIAL BEACH HEALTH CENTER

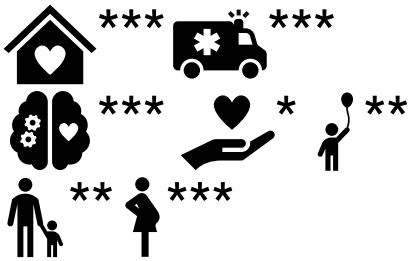
1016 OUTER RD
SAN DIEGO, CA 92154
*Phone: (619) 429-3733*
*After Hours Phone: (619) 429-3733*
*Accessibility: CONTACT PROVIDER*
*Website: ibclinic.org*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: tsadlowski@ibclinic.org*
*Phone for New Referrals and Existing Patients: (619) 429-3733*

## 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) 429-3733*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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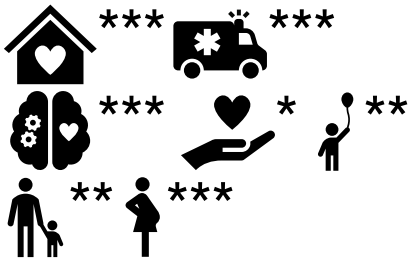
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*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*

### HORIZON RECUPERATIVE CARE

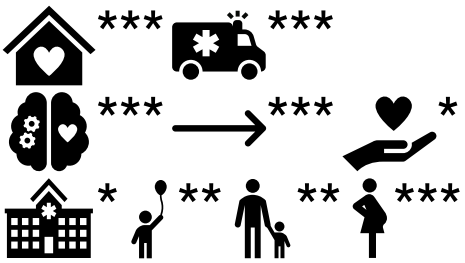
- 3423 CHANNEL WAY SAN DIEGO, CA 92110
- *Phone: (858) 326-1100*
- *After Hours Phone: (858) 326-1100*
- *Accessibility: CONTACT PROVIDER*
- *Website: www.horizoncenters.org*

*Community Supports Services: Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (858) 326-1100*

### 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*

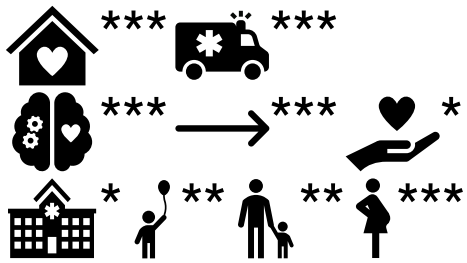
*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*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

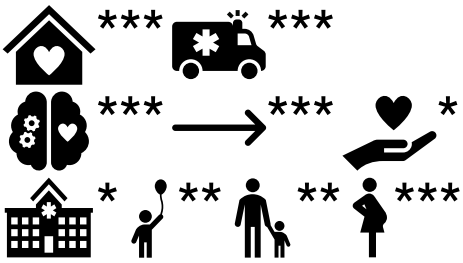
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*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

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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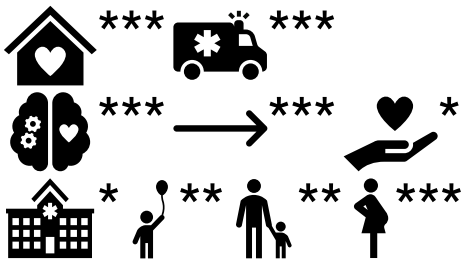
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

- 4157 FAIRMOUNT AVE SAN DIEGO, CA 92105
- *Phone: (619) 510-4641*
- *After Hours Phone: (619) 510-4641*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

*ECM Population of Focus:*

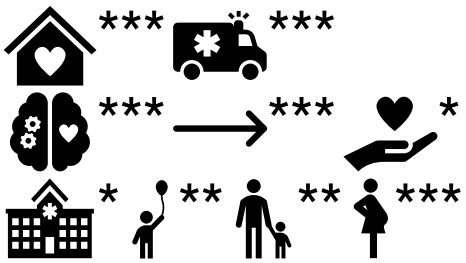


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

- 4074 FAIRMOUNT AVE SAN DIEGO, CA 92105
- *Phone: (619) 510-4641*
- *After Hours Phone: (619) 510-4641*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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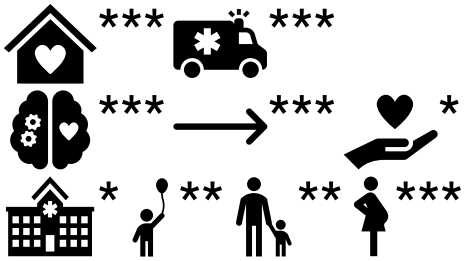
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

- 4157 FAIRMOUNT AVE SAN DIEGO, CA 92105
- *Phone: (619) 510-4641*
- *After Hours Phone: (619) 510-4641*
- *Accessibility: CONTACT PROVIDER*
- *Website: N/A*

*ECM Population of Focus:*

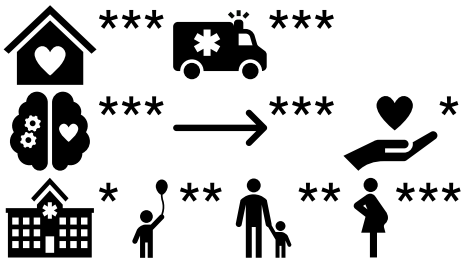


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with 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:*



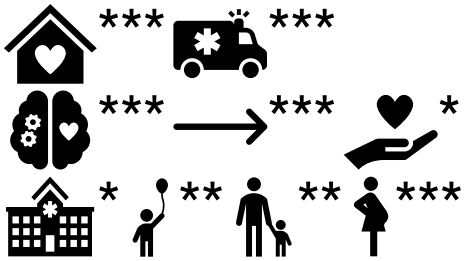
*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

### LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*

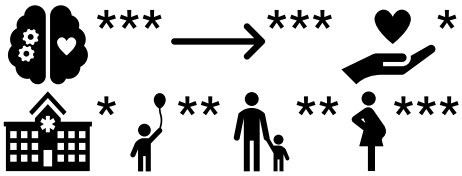


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*





*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

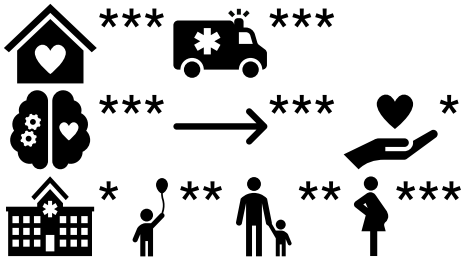
### LA MAESTRA

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

### COMMUNITY HEALTH CENTERS

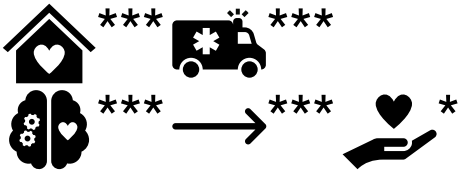
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*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

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
*Phone: (619) 510-4641*
*After Hours Phone: (619) 510-4641*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*





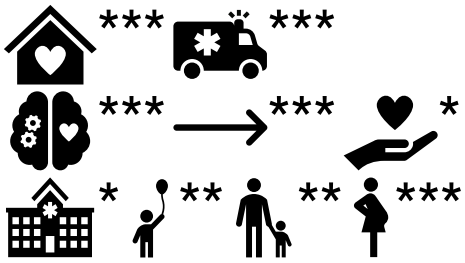
*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ECM.CS@LAMAESTRA.ORG*
*Phone for New Referrals and Existing Patients: (619) 510-4641*
*Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*
*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### LA MAESTRA COMMUNITY HEALTH CENTERS

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

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*

## MCALISTER INSTITUTE

2506 MARKET ST
SAN DIEGO, CA 92102
*Phone: (916) 442-0277*
*After Hours Phone: (916) 442-0277*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Sobering Centers*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (916) 442-0277*

## MAMAS KITCHEN

3960 HOME AVE
SAN DIEGO, CA 92105
*Phone: (619) 233-6262*
*After Hours Phone: (619) 233-6262*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Medically-Supportive Food/Meals/Medically Tailored Meals*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 233-6262*

## 2-1-1 SAN DIEGO

3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
*Phone: (858) 380-5750*
*After Hours Phone: (858) 380-5750*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: Housing Tenancy and*

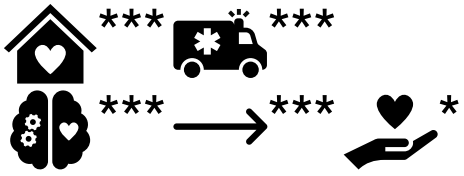
*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
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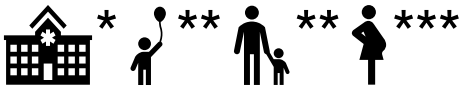
# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*Sustaining Services,Housing Transition Navigation Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@211sandiego.org*
*Phone for New Referrals and Existing Patients: (858) 380-5750*

### VOLUNTEERS OF AMERICA SOUTHWEST CALIFORNIA INCORPORATION

3530 CAMINO DEL RIO N STE 300
SAN DIEGO, CA 92108
*Phone: (619) 398-4585*
*After Hours Phone: (619) 398-4585*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*





*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@voasw.org*
*Phone for New Referrals and Existing Patients: (619) 398-4585*
*Mailing Address: 3530 CAMINO DEL RIO N STE 300;San Diego;CA;92108*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### 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*

### 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*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

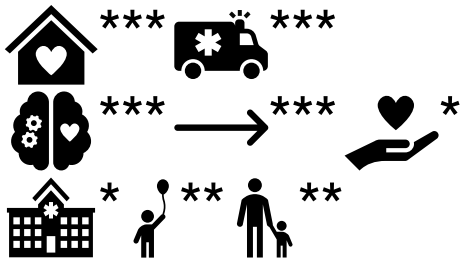
*Services,Housing Transition Navigation Services,Recuperative Care (Medical Respite),Short-Term Post-Hospitalization Housing*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (619) 810-8668*

### PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
*Phone: (619) 810-8668*
*After Hours Phone: (619) 810-8668*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: 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*

### SERENE HEALTH

3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*
*Mailing Address: 4849 RONSON CT STE 207;SAN DIEGO;CA;92111*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

### 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*

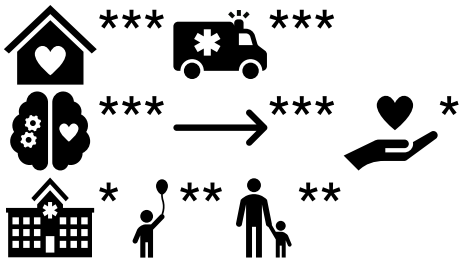
*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (858) 810-8700*

### SERENE HEALTH

3625 RUFFIN RD STE 206
SAN DIEGO, CA 92123
*Phone: (619) 354-1409*
*After Hours Phone: (619) 354-1409*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: andrea@serenehealth.com*
*Phone for New Referrals and Existing Patients: (619) 354-1409*
*Mailing Address: 4849 RONSON CT STE 207;SAN DIEGO;CA;92111*
*JI ECM Provider Billing- FFS (PAVE Enrollment)*
*JI ECM Provider Services-Warm Handoffs Only*

### LIGHTBRIDGE HOSPICE LLC

6155 CORNERSTONE CT E STE 220
SAN DIEGO, CA 92121
*Phone: (858) 458-2992*
*After Hours Phone: (858) 458-2992*
*Site Languages(s) Spoken: Spanish, Tagalog*
*Hours: M-F 8AM-5PM*
*Accessibility: CONTACT PROVIDER*
*Website: www.LIGHTBRIDGEHOSPICE.com*
*ECM Population of Focus:*

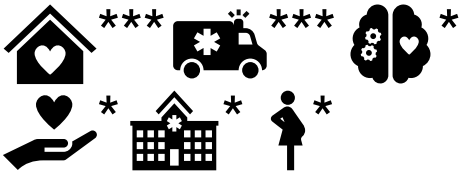


*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: JILL@LIGHTBRIDGEHOSPICE.COM*
*Phone for New Referrals and Existing Patients: (858) 458-2992*

**SAN FERNANDO**

### PARTNERS IN CARE FOUNDATION

732 MOTT ST STE 150
SAN FERNANDO, CA 91340
*Phone: (747) 500-4609*
*After Hours Phone: (747) 500-4609*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services:*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@picf.org*
*Phone for New Referrals and Existing Patients: (747) 500-4609*

### PARTNERS IN CARE FOUNDATION

732 MOTT ST STE 150
SAN FERNANDO, CA 91340
*Phone: (747) 500-4609*
*After Hours Phone: (747) 500-4609*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



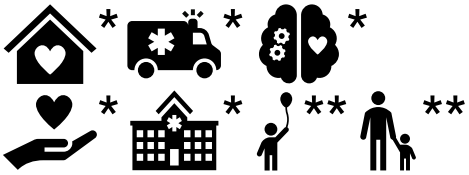


*Community Supports Services: Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecm@picf.org*
*Phone for New Referrals and Existing Patients: (747) 500-4609*

## SAN MARCOS

### 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*
*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*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# K. Iba pang Mga Provider ng Serbisyo (Mga Suporta sa Komunidad, Pinahusay na Pamamahala sa Pangangalaga)

*PROVIDER*
*Website: 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*
*Phone for New Referrals and Existing Patients: (760) 682-2424*

**VAN NUYS**

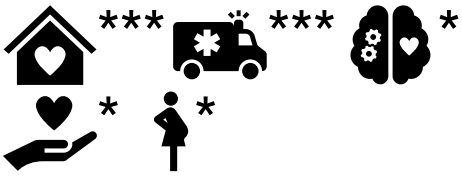
## LIBERTANA HOME HEALTH OF SHERMAN OAKS

5805 SEPULVEDA BLVD
STE 605
VAN NUYS, CA 91411
*Phone: (818) 902-5000*
*After Hours Phone: (818) 902-5000*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*Community Supports Services: Community Transition Services/Nursing Facilities Transition to a Home,Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services,Nursing Facility Transition/Diversion to Assisted Living Facilities,Personal Care and Homemaker Services,Respite Services*
*Street Medicine Provider: N*
*Phone for New Referrals and Existing Patients: (818) 902-5000*

**VISTA**

## VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084
*Phone: (760) 631-5000*
*After Hours Phone: (760) 631-5000*
*Accessibility: CONTACT PROVIDER*
*Website: N/A*
*ECM Population of Focus:*



*Community Supports Services: N/A*
*Street Medicine Provider: N*
*Email for New Referrals and Existing Patients: ecmteam@vcc.org*
*Phone for New Referrals and Existing Patients: (760) 631-5000*

*Mga Nasa Hustong Gulang **Mga Bata ***Parehong Mga Nasa Hustong Gulang at Bata
†Ang ECM at Mga Suporta sa Komunidad ay nangangailangan ng paunang awtorisasyon at limitado sa mga miyembro na nakakatugon sa mga partikular na pamantayan sa pagiging kwalipikado.
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# L. Mga Urgent Care Facility ng Blue Shield Promise

## 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/

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
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

1740 ROSECRANS ST
SAN DIEGO, CA 92106
(619) 790-7800
(619) 790-7800
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

8590 RIO SAN DIEGO DR STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1396058137

8260 MIRA MESA BLVD STE A
SAN DIEGO, CA 92126
(858) 900-3550
(858) 900-3550
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/

Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**

*NPI:* 1558788620

1740 ROSECRANS ST

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# L. Mga Urgent Care Facility ng Blue Shield Promise

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:* 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
8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
(619) 736-4600
(619) 736-4600
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1952995466
8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108
(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
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:* 1952995466
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# L. Mga Urgent Care Facility ng Blue Shield Promise

(858) 800-2880
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1558788620
5671 BALBOA AVE
SAN DIEGO, CA 92111
(858) 800-2880
(858) 800-2880
SU-SA 8AM-8PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

## SANTEE

**AFC URGENT CARE OF SAN DIEGO**
*NPI:* 1396058137
10538 MISSION GORGE RD STE 100
SANTEE, CA 92071
(619) 456-0033
(619) 456-0033
Arabic, Spanish
SU 8AM-6PM
M-F 8AM-8PM
SA 8AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.afcurgentcare.com/san- diego/
Accepting New Patients: No

## CHULA VISTA

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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N/A
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# L. Mga Urgent Care Facility ng Blue Shield Promise

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*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

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SU 1PM-10PM
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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Accepting New Patients: No

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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
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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**
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M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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*Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No

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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197

# L. Mga Urgent Care Facility ng Blue Shield Promise

386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
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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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SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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*Accessibility:* CONTACT PROVIDER
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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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*Accessibility:* CONTACT PROVIDER
N/A

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# L. Mga Urgent Care Facility ng Blue Shield Promise

Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
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SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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(858) 966-1720
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SU 1PM-10PM
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
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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 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

# L. Mga Urgent Care Facility ng Blue Shield Promise

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

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-1720
(858) 966-1720
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

## ESCONDIDO

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# L. Mga Urgent Care Facility ng Blue Shield Promise

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
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ESCONDIDO, CA 92029
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*Accessibility:* CONTACT PROVIDER
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**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

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2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

*NPI:* 1669617197
2125 CITRACADO PKWY
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ESCONDIDO, CA 92029
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M-F 8AM-5PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

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# L. Mga Urgent Care Facility ng Blue Shield Promise

*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

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*NPI:* 1669617197
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Accepting New Patients: No

## LA MESA

**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

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

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Accepting New Patients: No

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5565 GROSSMONT CENTER DR STE 2

# L. Mga Urgent Care Facility ng Blue Shield Promise

LA MESA, CA 91942
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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*Accessibility:* CONTACT PROVIDER

# L. Mga Urgent Care Facility ng Blue Shield Promise

N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
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5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED**

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# L. Mga Urgent Care Facility ng Blue Shield Promise

**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

**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

**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

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
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(619) 713-5375
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*Accessibility:* CONTACT PROVIDER
N/A
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5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT

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# L. Mga Urgent Care Facility ng Blue Shield Promise

CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
(619) 713-5375
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(619) 713-5375
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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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N/A
Accepting New Patients: No

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Accepting New Patients: No

**RADY CHILDRENS**

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**OCEANSIDE**

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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OCEANSIDE, CA 92056
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**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
(760) 547-1020
(760) 547-1020
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

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# L. Mga Urgent Care Facility ng Blue Shield Promise

N/A
Accepting New Patients: No

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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N/A
Accepting New Patients: No

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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N/A
Accepting New Patients: No

**SAN DIEGO**

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**

# L. Mga Urgent Care Facility ng Blue Shield Promise

*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
(858) 966-8800
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
(858) 966-8800
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*Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No

**RADY CHILDRENS**

# L. Mga Urgent Care Facility ng Blue Shield Promise

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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# L. Mga Urgent Care Facility ng Blue Shield Promise

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Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
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**RADY CHILDRENS**

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**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# L. Mga Urgent Care Facility ng Blue Shield Promise

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS**

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RADY CHILDRENS SPECIALISTS SAN DIEGO MED**

**FNDTN**
*NPI:* 1669617197
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**RCH MID CITY URGENT CARE**
*NPI:* 1710065933
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
(619) 280-2905
(619) 280-2905
SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
*Accessibility:* CONTACT PROVIDER
N/A
Accepting New Patients: No

**SOUTHBAY URGENT CARE INC**
*NPI:* 1558746750
1628 PALM AVE

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

# L. Mga Urgent Care Facility ng Blue Shield Promise

SAN DIEGO, CA 92154
(619) 591-9999
(619) 591-9999
Spanish, Vietnamese
SU 10AM-6PM
M-F 9AM-8PM
SA 10AM-6PM
*Accessibility:* CONTACT PROVIDER
https://www.southbayurgentcare.com/
Accepting New Patients: No

Kontakin ang Blue Shield Promise Customer Care sa 1-855-699-5557 para sa bagong impormasyon, Lunes hanggang Biyernes, 8:00 a.m. hanggang 6:00 p.m. TTY/TDD: 711. Bumisita online sa blueshieldca.com/promise/medi-cal. Maaaring magbago ang impormasyon sa direktoryo ng provider na ito.

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BAYLON, ALDO. .....689, 1473
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BELANGER, TANYA. .....584, 1404
BELEN, NEZER. .....308, 431
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BELLA VISTA HEALTH CENTER. ...1457
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BELTRON, KIMBERLY. .....431
BELVERUD, SHAWN. .....1379
BEN-HAIM, SHARONA.658, 936, 1030, 1380
BENARD, ROBERT. .....1062
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BERGGREN, ERICA. .....626
BERGMARK, JAMIE. .....1588, 1653
BERMAN, ZACHARY. .....913, 1333
BERNADETT, ALEX. .....1123
BERNARDO, RACHELLE. .....595
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BERUMEN, JENNIFER. .....1371
BESTERFELDT, LYDIA. .....431
BEVINS, ELIZABETH. .....853, 1183
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BIALOSTOZKY, MARIO. .....1253
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# M.Talatuntunan ng Pangunahing Pangangalaga


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BINDER, PRATIBHA.725, 857, 966, 1017, 1435
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BLASKIEWICZ, DONALD.....659, 936
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